

Holy Cross Catholic School PRE-SCHOOL PROGRAM Pick- Up Form

(2024-2025)

For your child's protection, please fill out the name of authorized persons to bring, or take your child from our Pre-Kindergarten program, other than yourself.

Please inform the authorized persons to be prepared to identify themselves to our staff. Please list parent other than one signing this, if authorized to pick up.

NAIVIE:	_ RELATION TO CHILD:
NAME:	_ RELATION TO CHILD:
NAME:	_ RELATION TO CHILD:
NAME:	RELATION TO CHILD:
Please inform us who	enever changes are in order
the arrangements will be:	such on the line "relationship" or tell us here what
Is there anyone who might stop for your child to (other parent, for instance)?	d that you do NOT wish to have your child released
Signature:	Date: