Thistly Meadow Primary School
Pick up form

Class:_____

Dear Parents/Carers,

In order to safeguard your child, written permission must be given for named persons to collect them at the end of the school day. Please fill in the form below, naming all people who may collect your child, either as a matter of course or in an emergency.

Please note; you may amend or add to this list at any point.

Child's name: _____**Date of Birth**:_____

I _____ (parent/carer of named child)

give permission for the persons named below to collect my child from Thistly Meadow

Primary School at the end of their school day. **Date**:_____

Name	**Relationship to child**

IF AT ANY TIME YOU NEED TO CHANGE ARRANGEMENTS YOU HAVE MADE PLEASE ENSURE YOU LET US KNOW IMMEDIATELY.