

PELP

Priddis Early Learning Program

PELP Alternate Pick Up Consent Form

I (We), being the parent(s) or guardian(s) of _____, consent to the following person or persons to collect our child _____ from school in my (our) absence.

- | | | | |
|----|----------------------------------|-----------------------------|-----------------------------|
| 1. | _____ | _____ | _____ |
| | <small>please print name</small> | <small>relationship</small> | <small>phone number</small> |
| 2. | _____ | _____ | _____ |
| | <small>please print name</small> | <small>relationship</small> | <small>phone number</small> |
| 3. | _____ | _____ | _____ |
| | <small>please print name</small> | <small>relationship</small> | <small>phone number</small> |

This consent and authorization will be in effect for the entirety of the school year, September 20____ through June 20____.

Dated at Priddis, Alberta this _____ day of _____ 20_____.

Parent 1/Guardian Signature

Parent 2/Guardian Signature
