Greenwich Christian Preschool

Alternate Pick Up Authorization Form

Child's Name (one form per child ple	ase):		
Authorized Individual's Name	Authorized Individual's Phone #	Date(s) of Pickup (eg. "All school year 2019-20" or specific date)	Is this person listed as an emergency contact on your child's enrollment form (Y/N)?
Please inform your alternate pick-up pers	on of the procedures & er	I Insure they have a name card (hai	ndwritten ok)
Parent/Guardian Signature: _			
Parent/Guardian Phone #:	Date:		