



**PERMISSION/DISMISSAL SLIP TO LEAVE SCHOOL
AT THE END OF THE DAY (Nursery)**

DESIGNATED PERSONS –

Please list designated person(s) you authorise to collect your child.

1. _____
2. _____
3. _____
4. _____

No other designated persons other than parents/guardians YES/NO

Parent/Guardian Name: _____
(Please print)

Signature: _____

PLEASE NOTE: It is the parent's responsibility to inform the school office of any changes to permissions given.