

AUTHORIZATION LEARNING TREE PRESCHOOL

Please be sure to enter your spouse's name if he/she is authorized to pick up the child

I authorize only the following person(s) to pick up my child when I am unavailable

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>
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Signature of parent or guardian: _____

Relationship to child: _____

Date: _____

TRIPS AND EXCURSIONS

I authorize Learning Tree Preschool of Crystal Lake to take my child on walking trips and special excursions. I authorize my child to ride in the vehicle leased by Learning Tree as a passenger. I understand that all such trips are under the supervision of the school staff and that health and safety precautions are taken in compliance with DCFS standards. I understand that I will receive prior notification of all special excursions.

Signature of parent or guardian: _____
