

Lisle Park District
Gentle Learning Preschool

Child Pick Up Authorization

Childs Name _____

I, _____, would appreciate if you would release my son/daughter to the following friend, relative or to the car-pool I belong to.

I understand my son/daughter will not be released to anyone not listed below.

Parent/Guardian

Date

Friend or Relative (name) Phone

Friend or Relative (name) Phone

CarPool (name) Phone

CarPool (name) Phone