

Sonshine Community Nursery School and Day Care
384 New Hempstead Rd. New City, N. Y. 10956
(845) 634-2163 ext. 2
Child Release Form

Child's Name: _____

This form is for the protection of you and your child. Please take the time to fill it out carefully.

When someone other than you is to pick up your child from the school we ask that you send in a note informing us of that fact. The note should contain the person's name and a brief description of his/her appearance.

Please list those people who would be most likely to pick up your child in case you are unable to come at either the regular time or in the event of an emergency.

My child may be released to the following individuals:

Name: _____ Telephone#: _____

Address: _____

Brief description of the person: _____

Name: _____ Telephone#: _____

Address: _____

Brief description of the person: _____

Name: _____ Telephone#: _____

Address: _____

Brief description of the person: _____

Mother's signature

Date

Father's signature

Date

