

**2018-2019  
TCW PARENTAL PERMISSION FORM  
FOR ALTERNATIVE PICK-UP**

*TCW staff will release a child ONLY to his/her parents or legal guardians, unless written permission to do otherwise is provided. Verbal permission may be given to a TCW staff member when circumstances require.*

I grant permission to the following person(s) to pick-up my child:

**Child's Name:** \_\_\_\_\_

*Persons Picking Up*

- Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_
- Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_
- Name: \_\_\_\_\_ Phone \_\_\_\_\_ Relationship: \_\_\_\_\_

*Time Period*

*Please check one of the boxes below:*

- Any time during the school year
- On the dates specified below:

From: \_\_\_\_\_ to \_\_\_\_\_  
*Start Date* *End Date*

\_\_\_\_\_  
*Parent/Guardian's Signature*      *Relationship*      *Date*