

# PARENT APPROVED PICK UP/DROP OFF LIST

CHILD NAME: \_\_\_\_\_

DOB: \_\_\_\_\_ CLASSROOM: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

APPROVED PERSON: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ DL# \_\_\_\_\_

APPROVED PERSON: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ DL# \_\_\_\_\_

APPROVED PERSON: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ DL# \_\_\_\_\_