



## REGULAR COLLECTION AT THE END OF THE SCHOOL DAY

Child's name: .....

Parent's/guardian's name: .....

Signature: .....

Date: .....

	Monday	Tuesday	Wednesday	Thursday	Friday
Full name of adult collecting above pupil or name of childcare provider					
Is your child in an after school club (e'g' football art?)  If so, please state the day (and dates if possible)					

N.B. If there are any changes to these arrangements, please notify the class teacher, teaching assistant or school office.