

**PARENT AUTHORIZATION
FOR PRE-K, CHECK-IN OR CHECK-OUT**

Child/Children _____ Grade: _____
_____ Grade: _____
_____ Grade: _____

The following individuals may check my child/children in or out of the McCurdy Schools of Northern New Mexico Pre-K.

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

It would also be helpful to know the names and relationships of those who may **NOT** pick up your child after school. Please list the names of those individuals below.

Name	Relationship
_____	_____
_____	_____
_____	_____

Please fill in:

Parent/Guardian: _____ Home Phone: _____
_____ Work Phone: _____
Address: _____ Cell Phone: _____

Parent/Guardian Signature _____ Date _____