

I, give permission for			to	
(Parent's Full Name) (Full Name of person to pick-up)				
pick up my child/ren (Child/ren's Full Name/s)				
This is ongoing permission. If at any stage these circumstances change at any time it is your responsibility to inform the centre by phone, via email or in person.				
I understand that if staff are unfamiliar with this person, the staff will be required to view identification at time of collection of the child/ children.				
Parent's Signature:		Date:		
Date Reviewed	Staff Name	Notified By	Comments	
Dale Reviewed	Sidil Name	Notified by	Comments	
Ongoing Collection Form				
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