



Alternate Pick Up Release Form

*As per LSM Security Policy, a Release Form must be completed by parents in advance in order for LSM to allow your child to be picked up by **anyone** other than parents/guardians listed on the Admission Form. Staff will ask for the identification (photo I.D) of the individual to compare name listed on the Release Form.*

Please complete this form and submit it to the office at your child's centre.

I, _____, HEREBY GIVE PERMISSION FOR MY CHILD(REN)

Child's Name _____

Child's Name _____

To be released to: _____

(Name of Alternate Person)

On: _____

(Date of Pickup, If ongoing – please indicate so)

(Signature of Parent/Guardian)

For purposes of identification, provide a physical description of the alternate person picking up child(ren):

(Signature of staff)

(Date / Time)