



Authority to Collect Form

I, _____ hereby give my consent for:
(name of parent/ guardian)

(name of adult collecting your child/ren)

(address and phone number of adult collecting your child/ren)

to collect my child/ren: _____
(name of child/ren)

from Gumnut Grove Child Care Centre :

☐ on the following date/s

OR

☐ until further notice

I understand that the person named above will be requested to provide photo identification to confirm the information on this form and will also need to sign the attendance record sheets.

Signed: _____ Date: ____ / ____ / ____
(Parent/Guardian)