



SUNNYHILL PRIMARY SCHOOL - ALTERNATIVE COLLECTION FORM

Please complete this form and return to the school office if you would like your child to be collected by someone other than their primary parent/carer. This form has to be completed prior to your child being collected by another person.

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|----------------------|--|-------------|--|---------------|--|
| Child's Name: | | DOB: | | Class: | |
|----------------------|--|-------------|--|---------------|--|

Will your child be collected by:

| | | |
|--|-----------------|--|
| Another Sunnyhill parent? | YES / NO | Name of parent: Their child's name/class: |
| A family relative? | YES / NO | Name: Relationship to child/parent: Telephone number: |
| A family friend? | YES / NO | Name: Relationship to child/parent: Telephone number: |
| An elder sibling? PLEASE NOTE that elder sibling has to be at least 16 years old if your child is in EYFS. | YES / NO | Name: Relationship to child/parent: Telephone number: |

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| Please enter any other additional information that the school must know about: |
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I am giving permission for my child/children to be collected from Sunnyhill Primary School and I will notify you immediately should this arrangement change:

| | | |
|------------------------------|--|-------------------|
| PARENT NAME: PRINT | | Signature: |
| Date : | | |

OFFICE USE ONLY

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|-------------------------|--|---|--|
| Date Received : | | Office Staff Name: | |
| SIMS Section 12: | | Class Teacher/ASC Informed Scanned-emailed | |