**Nominated Individuals Authorised to collect your child**

Name of Child(ren): …………………………………………………………………………………

Please provide below the full names of all individuals that are authorised to collect your child from The Treehouse, including parents/carers:

|  |  |  |
| --- | --- | --- |
|  | **Full Name** | **Relationship to child(ren)** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |

Name of Parent/Carer: …………………………………………………………………………….

Signature: ……………………………………………………………………………………………...

Date: ……………………………………………………………………………………………………