

AUTHORIZATION AND PERMISSION FORM FOR 2021-2022

I, _____, give permission to the following individuals to
Parent / Guardian
pick up _____ from Montessori One Preschool Academy and I
Student
release Montessori One from any liability for doing so.

1. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____
2. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____
3. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____
4. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____

The following individuals **MAY NOT** pick up, _____ from
Student
Montessori One Preschool Academy (leave blank if not applicable).

1. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____
2. Name: _____ Relationship: _____
Driver's License #: _____ Phone: _____

***If the mother or father is listed above, court documentation is needed.**

In order to help us serve your child better, please indicate the following information for your child.

My child takes a **daily** nap. _____ From _____ To _____ YES NO

I want my child to take daily naps at school (in the afternoons). YES NO

My child wears a diaper. YES NO

My child is currently being potty trained. YES NO

My child is already potty trained. YES NO

I give permission for pictures, films, or videotapes of my child to be taken for school records, promotions, publications and marketing including Montessori One website. YES NO

Parent Signature

Date