

Transportation  
Gold Coast Christian School

Child(ren)'s Name(s): \_\_\_\_\_

Because the school is responsible for students while they are in our care, please supply the following information. Should there be any change from what is written here, please be sure that the teacher is notified in advance by you. This will help us to avoid delays or embarrassment which could happen otherwise.



My Child(ren) has/have permission to leave the school premises after dismissal with any of the following people:

_____	_____
_____	_____
_____	_____
_____	_____

Without special permission, my child(ren) should not leave the school with:

_____	_____
_____	_____
_____	_____
_____	_____

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2018-2019 Up to date initials: \_\_\_\_\_ 2019-2020 Up to date initials: \_\_\_\_\_