

**PARENT AUTHORIZATION  
FOR PRE-K, CHECK-IN OR CHECK-OUT**

Child/Children \_\_\_\_\_ Grade: \_\_\_\_\_  
\_\_\_\_\_  
Grade: \_\_\_\_\_  
\_\_\_\_\_  
Grade: \_\_\_\_\_

The following individuals may check my child/children in or out of the McCurdy Schools of Northern New Mexico Pre-K.

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

It would also be helpful to know the names and relationships of those who may **NOT** pick up your child after school. Please list the names of those individuals below.

Name	Relationship
_____	_____
_____	_____
_____	_____

**Please fill in:**

Parent/Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
\_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_