

RSM-MetroWest

5 Auburn Street, Framingham, MA 01701
508-283-1355
www.metrowestschool.com



Dear parents,

Please complete this form if you would like to grant responsibility for picking up your child (children) from our school.

I give the following person(s) the right to pick my child(ren) up from RSM-MetroWest after class there.

NAME of CHILD

CLASS

1. _____
2. _____
3. _____

NAME of ADULTS APPROVED TO PICK CHILD(REN) UP:

1. _____
2. _____

Signed,

PARENT OF _____

DATE _____