

This Form must be completely filled out. If you have any questions please feel free to contact Jennifer Connolly at International Child Care 978-372-1221.

International Child Care's Transportation Form

Childs Name: _____ **D.O.B.** _____

Parents Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Pick-up/Drop-off location if different from address listed above:

IMPORTANT: IF A PARENT IS NOT HOME TO ACCEPT THEIR CHILD OR CHILDREN, THE DRIVER HAS BEEN INSTRUCTED TO DO THE FOLLOWING:

-The child will be returned to ICCC. Parents will be contacted, and will be responsible for picking their child up at the day care. If your child is picked up past 5:30 P.M. there is a \$1.00 a minute charge for every minute past 5:30 your child is here.

Transportation information will be reviewed periodically, however, it is the parents/guardians responsibility to inform ICCC of Transportation changes.

I, _____ have read and fully understand this form.

Date: _____ Form to be reviewed in: _____

Permission Slip

Date: _____

Child's Name: _____

I give permission for the following persons other than myself to accept my child from the International Child Care Center Transportation Vehicle. I understand that my child can be released to no other person unless I give my permission in writing. I also understand that I am responsible for making ICCC aware of any changes on that list.

ICCC's bus driver will be required to see a Positive Photo I.D. prior to releasing the child.

Names:

1. _____

2. _____

3. _____

4. _____

Thank You for your cooperation.

Respectfully,

Shannon O'Neil
Director

A.M. Pick-up time desired: _____

P.M. pick-up time desired: _____

Signature

Date