

# Bright Beginnings drop off and pick up fact sheet.

\_\_\_\_\_ has my permission to be transported to and/or from Bright Beginnings  
*(Child's Name)*  
cooperative preschool for the \_\_\_\_\_ school year by the following individuals: Please include  
parents' names.

**Name**

**Relationship to child**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**