

Little Me Pre-Kindergarten

ALTERNATE PICK-UP & EMERGENCY CONTACT FORM

2026-2027 School Year

Child's Name: _____

IMPORTANT - WHO SHOULD BE LISTED?

Please list TWO trusted adults who are NOT the child's parent/guardian. These people must be able to pick up your child when you cannot be reached or cannot arrive promptly. By listing them on this form, you authorize Little Me to release your child to them without needing separate permission from you each time.

Parents/guardians remain the primary contacts. Alternate pick-up people may be contacted when:

- your child becomes sick or needs to leave the program;
- your child needs assistance following a toileting accident or other personal-care situation that requires a guardian/authorized adult;
- there is an emergency, unexpected closure, power outage or other situation requiring early pick-up;
- Little Me cannot reach a parent/guardian, or a parent/guardian cannot arrive within an appropriate amount of time.

WHEN YOU ARE MORE THAN 10 MINUTES AWAY

If you will be more than approximately 10 minutes away from Little Me - for example, at the ski hill, mountain biking, travelling out of town, working outside the immediate area, or otherwise unable to return promptly - you are responsible for checking that at least one of your listed alternate pick-up people is available and willing to collect your child if needed.

Please do not assume your alternate contact is available. Families should make arrangements with their alternate person whenever they will not be able to return to Little Me promptly.

1ST ALTERNATE PICK-UP PERSON

Name: _____ Relationship to Child: _____

Cell Phone: _____ Other Phone: _____

☐ I confirm this person is NOT the child's parent/guardian.

Alternate Contact Acknowledgement:

I understand that I am listed as an authorized alternate pick-up person for the child named above. I agree that, when I have confirmed I am available, Little Me may contact me to collect the child if the parent/guardian is unavailable or unable to arrive promptly.

Alternate Person Signature: _____ Date: _____

2ND ALTERNATE PICK-UP PERSON

Name: _____ Relationship to Child: _____

Cell Phone: _____ Other Phone: _____

☐ I confirm this person is NOT the child's parent/guardian.

Alternate Contact Acknowledgement:

I understand that I am listed as an authorized alternate pick-up person for the child named above. I agree that, when I have confirmed I am available, Little Me may contact me to collect the child if the parent/guardian is unavailable or unable to arrive promptly.

Alternate Person Signature: _____ Date: _____

PARENT/GUARDIAN ACKNOWLEDGEMENT

I authorize Little Me to release my child to the two alternate pick-up people listed above without additional verbal or written permission from me each time. I understand that I am responsible for keeping their contact information current and for confirming alternate coverage whenever I will be unable to return to Little Me promptly.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____