

RELEASE FORM – Richmond Christian School

Teacher _____
Grade _____

Authorization and Direction by Parent(s) for the Release of a Child in the Event of a Disaster

Name of Child _____
First Name Middle Name Last Name

Name of Parents (or Legal Guardians)

Name of Father _____

Home Address _____

Home Phone # _____ Cell Phone # _____

Employer's Phone # _____ BC Driver's Licence # _____

Name of Mother _____

Home Address _____

Home Phone # _____ Cell Phone # _____

Employer's Phone # _____ BC Driver's Licence # _____

Name of Alternate Guardian #1 _____ Relation to Child: _____

Home Address _____ Home Phone # _____

Cell Phone # _____ Work # _____

Name of Alternate Guardian #2 _____ Relation to Child: _____

Home Address _____ Home Phone # _____

Cell Phone # _____ Work # _____

Do you have someone outside the Lower Mainland we can contact (i.e. East of Chilliwack, BC)?

Name: _____ Phone # _____

AUTHORIZATION TO RELEASE CHILD TO ALTERNATE GUARDIANS

I, _____, being the Parent/Legal Guardian of _____ (name of child), by my signature herein below, hereby authorize and direct Richmond Christian School to release the child named above into the care and custody of any of the persons listed above, whom I have appointed to act as Alternate Guardians in the event that I and/or the other parent (or legal guardian) are unable to retrieve the above named child due to a natural disaster including, but not limited to, a damaging earthquake.

Signed: _____ **Date:** _____
Signature of Parent/ Legal Guardian authorizing the release of the above named child to an Alternate Guardian

Office Use Only – Do not write in this space. PHOTO ID MUST BE PROVIDED (THIS INCLUDES PARENTS)

The above named child has been released into the care of:

(Name of person taking child) Parent/guardian or alternate guardian (CIRCLE) Photo ID (BCDL# etc.)

By: _____
(Name of person releasing child) (Title/Position) (Signature)

Signed: _____
(Signature of Parent/Legal Guardian or Alternate Guardian) (Date Released) (Time Released)