St. Mark Christian Montessori School

Building Strong Foundations for the Future



People other than parents/guardian authorized to pick up child:

1) Name:		_	Phone #
Address:	(Street)		Relation to Child:
	(City & State)		_
) Name:		_	Phone #
Address:	(Street)		Relation to Child:
	(City & State)	(Zip)	_
) Name:		_	Phone #
Address:	(Street)		Relation to Child:
) Name:	(City & State)	(Zip)	 Phone #
Address:	(Street)		Relation to Child:
	(City & State)	(Zip)	_
ignature of Parent or Gua	ardian:		Date: