

LA PETITE ECOLE BILINGUE

STEWART INTERNATIONAL SCHOOL



PLEASE
BRING
2 PHOTOS

AUTHORISATION TO COLLECT CHILDREN FROM SCHOOL 2016-2017 SCHOOL YEAR

We (parent's name) _____

hereby authorise: _____

contact number: _____

whose photograph is affixed above, to collect our child

_____ in (class) _____

from the school in our absence.

Signature of the parents:

Date :