

## WSYC Student Carpool Information

Child's Name \_\_\_\_\_ Phone # \_\_\_\_\_

My child may be picked up by the following individuals:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_