

## **Nexus Education Pick up Consent Form**

l,	(parent name) give the permission to Nexus Education	
representative to pick up	(children name) at	
	_ (Year group and class information) from	
	_ (School name).	
This permission is ongoing/fo	r specific dates:	_ (date range).
I also understand that in the event of unreasonable behavior that I will be requested to collect the children.		
Parent/Guardian Signature		
Date		
Dolotionabin To Child		