

# Hillman Primary School

An Independent Public School



## NON-PARENT COLLECTING STUDENTS

**Name of Student/s:** \_\_\_\_\_  
**Room No.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Name of designated person/  
Day Care Centre:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Days being collected:** \_\_\_\_\_

**Other Emergency Name  
and Contact Number:** \_\_\_\_\_

**Parent/Carer Name:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_