



**Gahanna Christian Academy
Extended Care
Child Release Form
2010-2011**

Child's Name: _____ Grade: _____

Parent's Name (print): _____

Your child's safety and well being are of the utmost concern to every staff member.

A teacher will release each child only to the parent, guardian or car pool driver specified below.

My signature below indicates that I understand Gahanna Christian Academy's policy regarding who may or may not pick up my child.

Only the persons listed below have my permission to pick up the above child from Gahanna Christian Academy's Extended Care programs.

Name	Relationship to child
_____	_____
_____	_____
_____	_____
_____	_____

I understand that Gahanna Christian Academy staff will ask to see a valid Ohio Driver's license of the person picking up my child.

At no time shall my child be released to anyone other than those I have listed, unless I notify the Preschool/Extended Care Administrator in writing.

Parent's Signature: _____

DATE: _____

GAHANNA CHRISTIAN ACADEMY NONDISCRIMINATION POLICY

"Gahanna Christian Academy recruits and admits students of any race, color, gender or ethnic origin to all its rights, privileges, programs and activities. In addition, the school will not discriminate on the basis of race, color, gender or ethnic origin in the administration of its educational programs and athletics/extra- curricular activities. Furthermore, the school is not intended to be an alternative to court or administrative agency ordered, or public school district initiated desegregation. Gahanna Christian Academy will not discriminate on the basis of race, color, gender or ethnic origin in the hiring of its certified or non-certified personnel."