

Pickwick Early Childhood Center  
1306 W Williams  
Ottumwa, IA 52501

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

Child's Name: \_\_\_\_\_

Teacher: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Return Date: \_\_\_\_\_

Your child is being sent home because of the following, \_\_\_\_\_. He/She will not be allowed to return to school until the above date. Our school policy prohibits us for allowing your child to return until they have been fever free for at least 24 hours. By signing this document, you agree to your child not returning until the above date.

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