

Power of attorney for transfer and release of a child

I, the undersigned:

Name and surname

Date of birth Citizenship

Permanent residence Phone number.....

I give, as the person in charge, full power to Mr./Mrs:

.....date of birthsignature.....

..... date of birthsignature.....

..... date of birthsignature.....

..... date of birthsignature.....

..... date of birthsignature.....

For transfer and removal of my son/daughter/ in the school year.....:

Name and surname..... Identification number.....

Date of birthCitizenship

Permanent residencePhone number

I understand that, I take full legal responsibility for the safety of my child from the time of transmission of a child by kindergarten teacher to aforementioned authorized person. Kindergarten teacher has, in order to protect my child, the right and obligation to ask the authorized person to submit identity card, if he or she has doubts about the legitimacy of authorized person, and authorized person refuses to show to teacher of kindergarten in a credible manner (ID card, driving Licence or passport) his or her identity, for the purpose of aforementioned legal act, then the kindergarten teacher has a right to refuse to discharge (release) of my child from the kindergarten. I understand that, if there are reasons for it – in the case of not releasing and not collecting of a child, kindergarten teacher or principal may notify the department of the social-legal protection of a child or the Police of Czech Republic. I take full material and legal responsibility for all acts connected with the fulfilment of aforementioned legal act.

In Day:

Signature of legal custodians: