

# CHILD PICK-UP AUTHORIZATION

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

RELATIONSHIP\_\_\_\_\_

PHONE NUMBER\_\_\_\_\_

ADDITIONAL PERSONS WHO MAY PICK UP YOUR CHILD ON A LESS FREQUENT BASIS:

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

RELATIONSHIP\_\_\_\_\_

PHONE NUMBER\_\_\_\_\_

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

RELATIONSHIP\_\_\_\_\_

PHONE NUMBER\_\_\_\_\_

ANY PERSON(S) NOT AUTHORIZED TO PICK-UP MY  
CHILD;\_\_\_\_\_

NOTE: ANY PERSON UNFAMILIAR TO THE CENTER WILL BE REQUIRED TO SHOW  
PROOF OF IDENTIFICATION. UNDER **NO** CIRCUMSTANCE WILL THE CHILD BE  
RELEASED TO ANYONE OTHER THAN THOSE LISTED ABOVE WITHOUT **WRITTEN**  
PERMISSION FROM THE PARENT.

MOTHER'S SIGNATURE\_\_\_\_\_ DATE\_\_\_\_\_

FATHER'S SIGNATURE\_\_\_\_\_ DATE\_\_\_\_\_