

### Pick-Up Authorization

The people listed below have my authorization to pick up my child from the program. I will inform my child's director/teacher each time a special pick is necessary.

Name	Relation to child	Phone Number
------	-------------------	--------------

Name	Relation to child	Phone Number
------	-------------------	--------------

Name	Relation to child	Phone Number
------	-------------------	--------------

These people are **NOT** allowed to pick up my child.

Name	Relation to child	Phone Number
------	-------------------	--------------

Name	Relation to child	Phone Number
------	-------------------	--------------

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

Parent's/ Guardian's Signature \_\_\_\_\_