



## Pickup Authorization

*(If you include this on your enrollment form, you do not need to have parents fill it out again separately)*

Child Name \_\_\_\_\_

Date \_\_\_\_\_

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

Name	Relationship to Child	Phone Number

These people are NOT allowed to pick up my child. (Note: one parent cannot list the other parent as not allowed to pick up their child unless there is legal documentation to support the request.)

Name	Relation to Child

Parent or Guardian signature \_\_\_\_\_