

Child Pick-Up Notification

Date(s) of Pick-Up: _____

Child's Name(s): _____

I give my permission for the following person to pick up my child:

Name of Person (as it appears on Drivers License)

Relationship to child

Approx. time of pick-up

Parent Signature

Authorized Pick-Up Signature

OR

_____/_____/_____
Time of phone authorization - which parent verified – staff initials

ID checked –staff initials