Child Pick-Up Authorization Form

_____ has my permission to pick up

(Authorized pick-up person first & last name)

_____

(child(ren)'s name(s))

On _____ at _____.

(Date/s)   *(Time)*

_____   _____

Parent/Guardian Signature   **Date**

Staff Use Only: ID Checked ☐   Staff Initials _____

Child Pick-Up Authorization Form

_____ has my permission to pick up

(Authorized pick-up person first & last name)

_____

(child(ren)'s name(s))

On _____ at _____.

(Date/s)   *(Time)*

_____   _____

Parent/Guardian Signature   **Date**

Staff Use Only: ID Checked ☐   Staff Initials _____