



**Authorized Pick-up:**

I authorize the following individual to take my child from the child care premises. (Please let us know at the beginning of the day when your child will be picked up by one of the authorized individuals.)

(1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email: \_\_\_\_\_

(2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email: \_\_\_\_\_

If applicable, please provide copies of any custody agreements, court orders, restraining orders.

**Notes:**

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**Anticipated Days/Time for Pick up:**

Monday	Tuesday	Wednesday	Thursday	Friday
Arrive:	Arrive:	Arrive:	Arrive:	Arrive:
Depart:	Depart:	Depart:	Depart:	Depart:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Child's Name: \_\_\_\_\_