

Authorized Pick-up List
(other than parents)
Must Bring Picture ID to pick up child/children

Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email address: _____

Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email address: _____

Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email address: _____