



## Pick-up Authorization Form

Please complete this form and turn in with a copy of authorized person's photo ID. **ID must be on file before pick-up authorization is accepted.**

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

Parent's Name: \_\_\_\_\_

\_\_\_\_\_ has my permission to pick up my child on:

\_\_\_ This date only:        /        /

\_\_\_ Any day (They will receive their own access code)

Relationship to Child: \_\_\_\_\_

\_\_\_\_\_  
Parent Signature