



# RESTRICTED PICK-UP FORM

## List of Persons Authorized to Pick Up My Child(ren)

In accordance with the state law, we must have on file the names, addresses and telephone numbers of the individuals permitted to drop off and collect your child(ren) from our facility. If someone arrives to pick-up your child(ren) and we have not been introduced and their name is not on our file, we CANNOT release your child to them.

Please list below any person's authorized to pick up your child(ren) **INCLUDING CHILD(REN)'S PARENTS AND/OR GUARDIANS** so that we can avoid any embarrassment, inconvenience, or tragedy. Also, please call us if you will not be in attendance or if there are changes to the carpool pick-up schedule.

**Name of Child:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_  
(Last) (First) (Nickname)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

**I give the above listed persons permission to pick up my child, and I understand that if the name does not appear on this list, my child will not be released to them.**

**Parent / Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent / Guardian Name: (Printed)** \_\_\_\_\_