

Pick Up Information

(Office Copy)

Child's Name _____ Date _____

Date of Birth _____

Mother's Name _____ able to pick up ___yes___no

Work Phone: _____ Cell Phone: _____ Home Phone: _____

Father's Name _____ able to pick up ___yes___no

Work Phone: _____ Cell Phone: _____ Home Phone: _____

If a parent is not able to pick up the child from our center, you must provide a copy of your custody agreement for our file.

Please list anyone you give permission to pick up your child from the center. We are unable to release your child to anyone other than the people listed on this form.

Name	Relationship	Telephone Number

Parent/Guardian Signature _____ Date _____