

**AUTHORIZATION FORM
EARLY CHILDHOOD CENTER**

Your child's safety is very important to us. On the form below, please list the ONLY people who are authorized to pick up your child from school. We will not release your child to anyone not on the list without written permission from you.

CHILD CUSTODY INSTRUCTIONS MUST BE ON FILE WITH THE DIRECTOR

CHILD'S NAME _____

PARENT'S NAME _____

These are the only people authorized to pick up my child from day care.

NAME _____

RELATIONSHIP TO CHILD _____

PHONE _____

NAME _____

RELATIONSHIP TO CHILD _____

PHONE _____

NAME _____

RELATIONSHIP TO CHILD _____

PHONE _____

PARENT'S SIGNATURE _____

If you need additional space please use the back of this form.