



AUTHORIZATION FOR PICK-UP

Child's Name _____

Child's Class _____

I understand that only those individuals listed on this page are authorized to pick up my child. Under no circumstances will my child be released by Little Ones to any other individuals unless the Director is given written consent to do so. If someone other than the "regular person" is picking up your child, a note or email should be given to the Director on that day, even if this person is on your authorized pick up list. This list can be updated and changed at any time with written notification to the Director. Identification will be asked for until staff becomes familiar with individuals on this list who will be picking up your child. Thank you.

Parents must be listed.

	NAME	ADDRESS	RELATIONSHIP	PHONE #1
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

In case of an emergency and I cannot be reached, please contact **(please list at least three)**:

	NAME	ADDRESS	RELATIONSHIP	PHONE #1
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Signature of Parent/Guardian

Date