



AUTHORIZED PICK-UP

This form required to authorize people other than parents/guardians or emergency contacts to pick up a child from our care.

Child's Name (Required): _____

Pick-Up Person 1: _____

Pick-Up Person 1 Phone: _____

Pick-Up Person 2: _____

Pick-Up Person 2 Phone: _____

Pick-Up Person 3: _____

Pick-Up Person 3 Phone: _____

I understand that the people listed above are who I give permission to pick up my child. I further understand that if changes need to be made mid-year, I must contact Park Headquarters.

Print Name (Required): _____

Signature (Required): _____