

**Authorization for Student Pickup**

1. Childs Last Name First Name

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 Parent/ Legal Guardians Name

**Password for Unauthorized Pickup:**

This password should be kept confidential. Only **the parent and the center administration** will know it. The password is used as a means of positively identifying a parent if they call the center to approve an unauthorized pickup. The pickup person should not know the password, they are required to present their photo ID (driver’s license).

 **Authorized for Pickup:** Relationship to child: ­­­­­­\_\_\_\_\_ Last Four S.S. #:

 other than parents

Last Name First Name

Address City State Zip

Home Phone Cell Phone Cell Phone Provider

 **Authorized for Pickup:** Relationship to child: ­­­­­­\_\_\_\_\_ Last Four S.S. #:

 other than parents

Last Name First Name

Address City State Zip

Home Phone Cell Phone Cell Phone Provider

Parent Signature Date

Center Representative Signature Date