



Authorization for Student Pickup

1) Childs Last Name _____ First Name _____

2) Childs Last Name _____ First Name _____

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:

other than parents

Relationship to child: _____

Last Four S.S. #: _____

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Cell Phone Provider _____

Authorized for Pickup:

other than parents

Relationship to child: _____

Last Four S.S. #: _____

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Cell Phone Provider _____

Parent Signature

Date

Center Representative Signature

Date