

# Restricted Pick Up Form

## List of Persons Authorized To Pick Up My Child(ren)

In accordance with the state law, we must have on file the names, addresses and telephone numbers of the individuals permitted to drop off and collect your child(ren) from our day care facility. If someone arrives to pickup your child(ren) and we have not been introduced and their name is not on our file, we **CAN-NOT** release your child to them.

Please list below any person's name, address and telephone number who you have authorized to pick up your child so that we can avoid any embarrassment, inconvenience, or tragedy. Also, please call us if you will not be in attendance

Name of Child \_\_\_\_\_ Birth Date \_\_\_\_\_  
(Last) (First) (MI) (Nickname)

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Where Employed \_\_\_\_\_ Office Phone \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Where Employed \_\_\_\_\_ Office Phone \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Where Employed \_\_\_\_\_ Office Phone \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Where Employed \_\_\_\_\_ Office Phone \_\_\_\_\_

I give the above listed persons permission to pick up my child and I understand that if the name does not appear on this list, my child will not be released to them.

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date