

Child Pick-up Authorization

I, _____ authorize _____ (site name) Childcare to release my child(ren) to the person(s) designated. This is in consonance with the _____ (site name) Emergency Operations Plan.

Student's Name	Designated Custodians Name and Relationship

Your Signature

Relationship

Date

Print Name

Address

Home Phone

Work phone

Cell Phone

Please Note: Please print clearly. Parents are to designate themselves as custodians and any additional friends, neighbors or relatives you would be willing to release your child to in the event the children must evacuate from the site or center. This form is a required part of the Emergency Preparedness plans that all licensed childcare facilities are required to have in place.