



Pick-Up Authorization Form

Child's Name _____

Parent/Guardian Name _____

The following people are authorized to pick up the above named child other than the Parent/Guardian:

Valid Photo ID Required at Pick-Up

Name

Address

Phone

Relationship to Child

Valid Photo ID Required at Pick-Up

Name

Address

Phone

Relationship to Child

Valid Photo ID Required at Pick-Up

Name

Address

Phone

Relationship to Child

Your child will not be allowed to leave The DAC Children's Center without prior authorization from the responsible parent/guardian. If someone on the above list is going to pick up your child, please inform your child's teacher ahead of time. All persons allowed by parent to pick up the child must be listed on this form. The DAC staff reserves the right to ask for identification for the safety and well being of each child.

Parent/Guardian Signature

Date