

Authorized Pick-up Form

Child Name: _____

Grade Sept. '18 _____

Parent Name: _____

I authorize the following people to pick up my child at Covenant Church. **Please include names of both parents as well as any other authorized adults.**

Please note that drivers must show identification to pick up child.

List all possibilities (i.e. grandparents, neighbors, family)

Name: _____ Phone # _____

Relationship to child: _____

Name: _____ Phone # _____

Relationship to child: _____

Name: _____ Phone # _____

Relationship to child: _____

Name: _____ Phone # _____

Relationship to child: _____

Name: _____ Phone # _____

Relationship to child: _____

Name: _____ Phone # _____

Relationship to child: _____

Parent's Signature: _____ **Date:** _____