

THE APPLEWOOD LEARNING CENTER

Authorization to Pick Up

Today's Date \_\_\_\_\_

Children's Names \_\_\_\_\_

Name of Adult Authorized to pick up \_\_\_\_\_

Authorized to pick up (circle one)      ANY TIME      DATE(S) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

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

Please remember to let the classroom teacher know on the days this person is picking up.

Please remind your pick-up person to bring a photo ID.

THE APPLEWOOD LEARNING CENTER

Authorization to Pick Up

Today's Date \_\_\_\_\_

Children's Names \_\_\_\_\_

Name of Adult Authorized to pick up \_\_\_\_\_

Authorized to pick up (circle one)      ANY TIME      DATE(S) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

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

Please remember to let the classroom teacher know on the days this person is picking up.

Please remind your pick-up person to bring a photo ID.