

Authorization To Pick Up On A Specified Date Form

*This form can not exceed a 5 day period

* Person listed to pick up ***MUST PRESENT PICTURE IDENTIFICATION***

Child(ren) Name(s): _____

Name Of person picking up child: _____

Date(s): _____

Phone Number: _____

I, the parent/guardian, am allowing the person listed above to pick my child(ren) up from Just For Me Family Center LLC on the above date(s).

Any Special Notes:

Parent/Guardian Signature: _____

Date: _____