

Robins Nest Learning Center

PICK UP AUTHORIZATION

Please list any family member, friend, co-worker that may be picking up your child. If there is a parent or someone that is not allowed to pick up the child be sure to note that also.

Child's Name:		
4 Digit Code for Parents:		
Parent/Guardian Name:		
Parent/Guardian Name:		
I authorize the following people to pick up my	child/children:	
They must sign in/out after presenting a valid II	D when picking up child/children.	
Please list Name, Relationship, Address, Pho	one Number & Work Phone	
1)	Relationship	:
Add:	Ph:	_ Work Ph:
2)	Relationship	:
Add:	Ph:	_ Work Ph:
3)		
Add:	Ph:	_ Work Ph:
4)		
Add:	Ph:	_ Work Ph:
5)		
Add:	Ph:	_ Work Ph:
6)	-	
Add:	Ph:	_ Work Ph:
This person can pick up my child on certain da	ys according to court ordered parenting time	:
		_
Times/days allowed		