



CHILD PICK-UP AUTHORIZATION FORM

(To be completed by Parent/Guardian)



This form is for additional use only. Please return with registration.

CHILD/FAMILY INFORMATION

PLEASE PRINT CLEARLY

Child's Name _____ Male Female Birthdate ___/___/___ Age ___
 Home Address _____ City _____ State _____ Zip _____
 Home Phone _____ School _____

CHILD PICK-UP AUTHORIZATION

VALID FOR SCHOOL YEAR 20___ TO 20___

I give permission for my child to be released from the YMCA program to the people listed below at any time. I understand YMCA staff require these people to furnish Photo Identification before releasing my child.

Name _____ Address _____	Name _____ Address _____	Name _____ Address _____
Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____	Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____	Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____

Name _____ Address _____	Name _____ Address _____	Name _____ Address _____
Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____	Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____	Work Phone _____ Home Phone _____ Relationship _____ Cell/Pager _____

EMERGENCY INFORMATION

In case of emergency, and the YMCA staff is unable to reach the parent/guardian listed above, the following individual has permission to make decisions regarding the care of my child, including permission to pick up my child from the YMCA in case of an emergency or dismissal from the YMCA.

Name _____ Relationship to child _____
 Home Phone _____ Work Phone _____ Cell _____
 Home Address _____ City _____ State _____ Zip _____

PARENT/GUARDIAN AGREEMENT

I understand:

- ✓ I must notify the YMCA staff immediately of any changes on this form.
- ✓ It is my responsibility to arrange for my child to be picked up from the program before closing. If my child is not picked up on time and attempts to contact me have failed, another authorized person will be contacted. If all attempts to contact an authorized person to pick up my child have failed, the YMCA staff will contact Child Protective Services and/or police officials for further instructions.
- ✓ Should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff may have no recourse but to contact the police.

MY SIGNATURE ACKNOWLEDGES MY UNDERSTANDING OF AND AGREEMENT TO THE ABOVE

Parent/Guardian Signature _____

Date _____