



**Children's Safari Learning Center**

**Pickup Authorization**



Child's Name \_\_\_\_\_

Date \_\_\_\_\_

The people listed below have my authorization to pick up my child from the program. I will inform my child's provider each time a special pickup is necessary.

<b>Name</b>	<b>Relation to Child</b>	<b>Phone Number</b>

These people are NOT allowed to pick up my child.

<b>Name</b>	<b>Relation to Child</b>

Parent's Signature \_\_\_\_\_