

2010-2011
MAIN STREET PRESCHOOL & PARENTS DAY OUT
PICK UP AUTHORIZATION

Name of Child _____

Please list the persons who are authorized to pick up your child from Tucker Baptist Weekday Education. Please notify those not familiar to our staff that we will require license identification before releasing your child to them.

1. Name _____
Relationship to child _____
Address _____
Phone _____

2. Name _____
Relationship to child _____
Address _____
Phone _____

3. Name _____
Relationship to child _____
Address _____
Phone _____

Persons who may not pick up your child:

1. _____ 2. _____

Parent Signature _____

Name (Print) _____

Date _____