

Charming Hearts Authorized Pick up Form

Name of Child

I give permission for the following individuals to pick up my child from the program:

Full Name	Relationship to child	Home Phone	Work Phone	Cell Phone

I understand that all individuals are required to have photo identification on file at the program. Anyone not listed will not be able to pick up from the program as well as anyone under the age of 18. I understand that I can add anyone to this list at anytime by speaking to the administrator and making the person aware of the photo identification requirement.

Parent/ Guardian Signature

Date