

**AUTHORIZATION FOR PICK-UP**  
**~ Mandatory for Cubbies and Sparks ~**

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

☐ Cubbies      ☐ Sparks      ☐ T&T      ☐ Trek

**PERSONS AUTHORIZED TO PICK UP CHILD, OTHER THAN PARENT OR GUARDIAN**

1. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**PLEASE LIST ANY PERSONS NOT AUTHORIZED TO PICK UP CHILD:**

1. Name: \_\_\_\_\_

Brief Description: \_\_\_\_\_

2. Name: \_\_\_\_\_

Brief Description: \_\_\_\_\_

Guardian Signature\_\_\_\_\_

Date\_\_\_\_\_