

EMERGENCY CONTACTS / AUTHORIZATION TO RELEASE CHILD

Child's Name _____

Is there a court order affecting this child? ____ YES ____ NO

If YES, parent/guardian must provide **a certified copy** of the court order before the child may attend the program. If NO, please be aware that as per law, both parents will be afforded immediate access to the child. Please refer to the Parent Handbook for further explanation of this policy or speak with the Preschool Director.

In case of emergency, or if I am unable to pick up my child I, _____ (parent/guardian), authorize Christ Church Preschool-The Growing Place to release the above referenced child to the following persons. I understand that no further written authorization from me is required for my child to be released to one of the persons listed herein. **I understand that additions or deletions to this list must be submitted in writing before the center will honor them.**

Parent/Guardian Signature

Date

Please include below anyone upon whom you may call in an emergency to help you with picking up your child. We have provided four spaces. Please feel free to copy this form or use additional pages as necessary. For the safety of your child, please inform all authorized pick-up persons listed herein that we will ask for a government-issued photo ID when they arrive to pick up your child. If they do not have a government-issued photo ID when they arrive, we WILL NOT release your child to them under any circumstance. **The Growing Place will not release a child to anyone under 18 years of age.**

1. Name: _____ Relationship to child: _____
Address: _____
Home Phone: _____ Cell Phone: _____
Work Phone: _____

2. Name: _____ Relationship to child: _____
Address: _____
Home Phone: _____ Cell Phone: _____
Work Phone: _____

3. Name: _____ Relationship to child: _____
Address: _____
Home Phone: _____ Cell Phone: _____
Work Phone: _____

4. Name: _____ Relationship to child: _____
Address: _____
Home Phone: _____ Cell Phone: _____
Work Phone: _____