



Ripon Children's Learning Center

Authorized Pick-Up Form

Child(ren)'s Name: _____

In order to ensure the well being of all children and our ability to help you with picking up your child, please fill out this form. This will be used as our main resource for emergency pick-up. Please make sure to include every person that could assume the custody of your child for any unforeseen circumstances.

Please include everyone who can pick your child up from Ripon Children's Learning Center (RCLC). Please notify them that they must have a photo ID when they come to RCLC to pick up.

1. Name _____

Relationship _____

Phone _____

2. Name _____

Relationship _____

Phone _____

3. Name _____

Relationship _____

Phone _____

4. Name _____

Relationship _____

Phone _____

I agree with the information provided above. I realize that RCLC will require photo I.D. from anyone picking up a child. I am also responsible to notify RCLC of changes or additions to the authorized pick up list. Additional spaces on the back.

Parent/Guardian Name _____

Signature _____ Date _____