



ALL KIDS FIRST

“ enhancing your child’s potential”

Pick-Up Authorization Form

I(Parent /Guardian)

..... (Person picking up my child)

give permission to to pick up my child.....,

on from All Kids First / Connecting Dots.

Persons not mentioned on this form do not have permission to pick up my child.

Parent/Guardian signature

Date

Please see Office Manager if there are any questions or concerns.