KIWANIS DAY CARE CENTER

71 WASHINGTON AVENUE
HUNTINGTON, WV 25701
(304) 525-8701

PICK-UP PERMISSION FORM

NOTE: I hereby give permission for my child:_____
to leave the Kiwanis Day Care Center with the following persons named below. I understand that it is my responsibility to notify the center, in writing of any changes to this list.

NAME	RELATIONSHIP	ADDRESS	PHONE

DATE_____SIGNATURE OF PARENT_____

Name of Persons who may not pick up the child

_____
_____
_____
_____

Is there a separation or divorce custody issue? If so, please attach all documents which state the legal custodian of the child.