



Permission Form

Child's Name: _____ DOB: _____

Child's Address: _____ City: _____ Zip Code: _____

Child Release

For children's safety, Sunrise Child Development Center will release a child only to the parent(s)/legal guardian(s) who have signed this form and to those listed below by the parent(s)/guardian(s).

Sunrise Child Development Center will not release my child to any other person unless I notify the center, following the guidelines listed below:

- If the person (relative, friend) picking up my child is listed on this form but does not regular pick up my child or has never before picked up my child, I will notify the center verbally and by email, in advance.
- If the person picking up my child is NOT listed on this form, I must notify the center in writing, in advance.
- Photo identification will be required of any person picking up my child.

NAME _____

PHONE # _____

ADDRESS _____

RELATIONSHIP TO CHILD _____

NAME _____

PHONE # _____

ADDRESS _____

RELATIONSHIP TO CHILD _____

NAME_____

PHONE #_____

ADDRESS_____

RELATIONSHIP TO CHILD_____

NAME_____

PHONE #_____

ADDRESS_____

RELATIONSHIP TO CHILD_____

Signature of Parens/Guardians: