

**2010-2011 TLC Academy  
Emergency Contacts with Pick Up Authorization Form**

I, \_\_\_\_\_, the parent and/or the legal guardian  
(Please print)

for \_\_\_\_\_, give permission for the following people to be contacted in case of an emergency and to pick up my child.

Name	Phone #	Relationship
1.		
2.		
3.		
4.		
5.		
6.		

**Additional People Authorized to Pick Up, but not Emergency Contacts**

ie. Carpool, neighbor, co-worker

Name	Phone #	Relationship
1.		
2.		
3.		

Please tell the authorized individual to have picture identification with them and available for the staff to review.

I understand that it is my responsibility to notify the school if I need to change this list and that the school will continue to release my child to people on this list unless notified otherwise.

\_\_\_\_\_  
Parent and/or Legal Guardian Signature

\_\_\_\_\_  
Date