



Baldwin Bethany Community Development Corporation

Parent Authorization to Pick Up

Students Name:

Last Name

First Name

Emergency Contact Information

Parent/Guardian Name: _____

Contact Numbers:

Work _____ Home _____ Cell _____

Parent/Guardian Name: _____

Contact Numbers:

Work _____ Home _____ Cell _____

In addition to the people listed above, my child may be released to the following people (this includes other family members, babysitters, and anyone else you give permission to pick your child up from the program).

Name/Relationship: _____

Contact Numbers:

Work _____ Home _____ Cell _____

Name/Relationship: _____

Contact Numbers:

Work _____ Home _____ Cell _____

Anyone other than the primary parent(s) picking up a child from camp will be asked to show a photo I.D. (e.g., Driver's License, State I.D., etc.)