



Child Pick-up Authorization Form

The safety of your child is our number one priority. Please list any person other than the primary caregiver indicated below who is authorized to pick up your child. For the safety of your child, Empowered Sports & Fitness will not release your child to any person who has not been indicated on this form. If changes need to be made at any time, please contact us. We appreciate your understanding and cooperation.

Child's Name _____ Date of Birth _____

Parent/Guardian Name(s) _____

Phone Number(s) _____

I hereby give authorization for the following person(s) to pick up my child from Empowered Sports & Fitness Social Skills Group

Name: _____ Relationship to Child: _____

Phone Number (s): _____

Name: _____ Relationship to Child: _____

Phone Number (s): _____

Name: _____ Relationship to Child: _____

Phone Number (s): _____

Parent/Guardian Signature: _____ Date: _____