List of Persons Authorized to pick up child/children

Provider:	
Address:	
Provider Phone #:	
As per NYS Regulation416.15 (C) (4) (c) The program must maintain on file at the groinspection by the Office or its designees at any accurate manner: (4) the names and addresses of persons authorogroup family day care home	time, the following records in a current and
Parent/Guardian Name:	
Address:	
City/State/Zip:	
Name of child (ren) enrolled:	
Name of person(s) authorized to pick up child:	Relationship to child
Devent/Consider Signature:	Date:
Parent/Guardian Signature: Date:	
(All persons authorized to pick up children must produce ID to the facility in order to pick up child (ren))	
Revised 2/14 CAB	