

**South Orange Country Day School
Alternate Pick-Up Person Documentation**

Child's Name _____

What is the normal pick-up time? _____

What time will the alternate pick-up? _____

Alternate Pick-Up Person Information

Name _____

Address _____

Phone # _____

For what days are you authorizing this person to pick-up your child?

Today only. Date _____

Period of time: From _____ Until _____

Everyday at normal pick up

Other _____

I have either introduced this person to the staff of South Orange Country Day School or I have provided a photo of this person to the office of South Orange Country Day School. I will also take responsibility for ensuring that this person brings photo identification when they arrive to pick up my child.

I authorize South Orange Country Day School to release my child to the alternate pick-up person noted above, on the days indicated above. I understand that by signing this release South Orange Country Day School will not call me to confirm the release of my child to this individual.

Parent Signature

Date