



## PICK UP AUTHORIZATION

Thank you for entrusting us with your child's care. We want to ensure their safety, and so the purpose of this form is to document any individuals, aside from the child's legal guardian(s), who are authorized to pick up the child and transport them from therapy services at The Center for Connection. Authorized individuals listed below must pick up the child in person and may be requested to show identification to the child's therapist or another Center for Connection staff member. Children will not be released to any person who fails to provide acceptable identification upon request. Additionally, per California state law, children under two years old and under 40lbs/40" will only be released to an authorized pick up with a rear-facing car seat; children under eight years old or under 4'9" will only be released to an authorized pick up with a car seat or booster seat, whichever is legally appropriate for the child.

### CLIENT INFORMATION

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Guardian 1 Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Parent/Guardian 2 Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I authorize the following responsible person(s) to pick up my child from The Center for Connection. This authorization remains in place until revoked in writing.

Authorized Person	Phone Number & Email	Relationship to Child
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please note that your child must be picked up at the designated time. The Center will charge a late fee of \$1.00/minute past the child's designated pick-up time. The child's guardian or the authorized pick up must be available for pick up at any time during the child's session in case of emergency.

### ACKNOWLEDGMENT AND CONSENT

Your signature provided below or electronically via our therapy notes web portal indicates that you have read and understood the information provided here and that you agree to these terms (either for yourself or your minor child).

Signature of Parent/Guardian 1: \_\_\_\_\_

Signature of Parent/Guardian 2: \_\_\_\_\_