## SUDBURY PARK & RECREATION AUTHORIZED PICK UP FORM

The following people are authorized to pick up my child, _	from Sudbury
Park & Recreation Programs. I understand that the Sudbo	ury Park and Recreation Department is not responsible for any
occurrences and/or accidents taking place outside of the	program location. Please include any adults over age 18 living i
your household (including yourself!).	
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*Please remember that all people listed as Authorized Pic	k Ups MUST come with a valid photo ID.
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Signature of Parent/Guardian:	Date:/
My child will be attending the following programs:	
Program:	Program Session/Date:
Program:	Program Session/Date:
Program:	Program Session/Date:
Adults authorized to pick up my child:	
Name:	Name:
Phone Number:	Phone Number:
Relationship to Child:	Relationship to Child:
Name:	Name:
Phone Number:	Phone Number:
Relationship to Child:	Relationship to Child:
Discos list and individually on the integral V DENIED and	and a constraint of the
Please list any individual(s) who is LEGALLY DENIED acce	ss to your child:
	<del></del>

To avoid problems at pick-up time, please include anyone who may ever possibly pick up your child. A written consent letter is required for pickup by anyone not on this list. Please remember to include car pool members.