



Child Pick-up Authorization

Child Name: _____

Child Code: _____

Please insert image of listed individual into the image fields below

Mother: _____

Phone Number: _____

Driver License or Passport #: _____ License Plate #: _____

Father: _____

Phone Number: _____

Driver License or Passport #: _____ License Plate #: _____

Individual Picking up Child: _____

Relationship to Child: _____

Phone Number: _____

Driver License or Passport #: _____ License Plate #: _____

Individual Picking up Child: _____

Relationship to Child: _____

Phone Number: _____

Driver License or Passport #: _____ License Plate #: _____

Individual Picking up Child: _____

Relationship to Child: _____

Phone Number: _____

Driver License or Passport #: _____ License Plate #: _____

I authorize The Brent Woodall Foundation to release my child(ren) to the person(s) designated on the Child Pick-up Authorization Form. This form will be used to identify individuals designated to pick up my child(ren). I understand individuals will need to provide a photo to keep on file for pickups.

Parent Printed Name: _____

Parent Signature: _____

Date: _____