

**Esther Jetter Preschool
Authorized Pick Up List**

Child's Name _____

Parents/Guardians: Please list all people **(including yourself)** who are authorized to pick up your child from Esther Jetter Preschool.

Name of Authorized Person	Phone Number	Relationship to Child

Please Note: Under no circumstances will your child be released to anyone unknown to school personnel without parent/guardian's authorization.

Parent Signature: _____

Date: _____