

Change of Authorized Pick-Up / Emergency Contact
This form is for parents/guardians to update the list of authorized individuals who can pick up their child from InspireWorks Enrichment programming. The authorized list will be contacted in case of emergency or if the parents/ guardians can not be reached.

Child and Parent/Guardian Information		
Child Name :		Date of Birth:
Parent/Guardian's Name:		Phone:
Program Type (Select One)	☐ Summer Camp	☐ After School Program
,		School
Authorized Pick-Up / Emergency Contact #1		
First Name :		Last Name :
Relationship to Child:		
Daytime Phone:		Cell Phone:
Authorized Pick-Up / Emergency Contact #2		
First Name :		Last Name :
Relationship to Child:		
Daytime Phone:		Cell Phone:
Authorization Information		
I give permission for the above listed people to pick-up my child from InspireWorks Enrichment Programming. I understand that individuals will be required to show a photo I.D. at the time of pick up.		
Signature of Parent/Gua	rdian:	Date: