

Homestead Day Care, LLC

PERSONS OTHER THAN PARENTS / GUARDIANS WHO ARE AUTHORIZED TO PICK UP CHILD – Provide information requested for each person. If no one, write "None."					
Relationship to Child	Name	Address – Home (Street, City, State, Zip)	Home / Cell Telephone No.	Name and Address – Place of Employment OR Where Reachable While Child is in Care	Telephone No.

EMERGENCY CONTACT – Provide information for the person to contact when parents / guardians cannot be reached. <input type="checkbox"/> Yes <input type="checkbox"/> No This person is authorized to pick up the child.					
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