

SCHOOL FOR YOUNG CHILDREN
First Unitarian Universalist Church
93 W. Weisheimer Rd.
Columbus, OH 43214

I authorize the following person(s) to pick up my child, _____ from the
School for Young Children on the following dates: _____ Child's name

Name: _____

Phone# _____ Anytime ___ (or on specific date only: _____)

Name: _____

Phone# _____ Anytime ___ (or specific date only: _____)

Name: _____

Phone# _____ Anytime ___ (or specific date only: _____)

Name: _____

Phone# _____ Anytime ___ (or specific date only: _____)

Print Parent Name:

Parent Signature:
