



5960 Fairview Road, Suite 300
Charlotte, NC 28210
Tel: 704-441-8715
www.autism-180.com
info@autism-180.com

Client Drop-Off and Pick-Up Authorization

Child's Name:

.....

Today's Date:

.....

Parent/Guardian's Signature:

.....

NO ONE WILL BE PERMITTED TO PICK UP YOUR CHILD IF THEIR NAME IS NOT LISTED BELOW. ALL PERSONS MUST SHOW THEIR PICTURE ID IF IT IS NOT ON FILE. MAKE SURE YOU LIST ALL ADULTS EVEN IF YOU RESIDE IN THE SAME HOUSEHOLD.

Parent/Guardian:

Cell Phone:.....

Work Phone:

Home Phone:

Address:

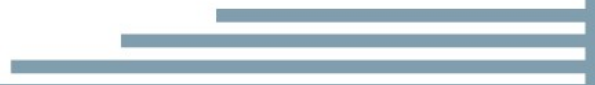
Parent/Guardian:

Cell Phone:.....

Work Phone:

Home Phone:

Address:





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PERSON(S) OTHER THAN PARENT/GUARDIAN AUTHORIZED TO PICK UP YOUR CHILD

Name:
Cell Phone:.....
Work Phone:
Home Phone:
Relationship:

Name:
Cell Phone:.....
Work Phone:
Home Phone:
Relationship:

Name:
Cell Phone:.....
Work Phone:
Home Phone:
Relationship:

Who Can Pick Up Your Child: Only adults 18 years of age and older. In case of a last-minute change or addition, please send an email to the office with a signed and dated note authorizing your child's release to the new person and including the dates for which permission is given. Email authorization is accepted from a parent/guardian's email address that we already have on record. Autism180 will not release clients to anyone, under any circumstance, other than those stated above. Anyone picking up students must carry a photo ID.