

PLEASE COMPLETE:

Last Name: _____

Session(s): _____

Pick Up Time: _____

PICK UP FORM

NOTE: Only those listed on this form by the legal parent or guardian are allowed to pick up your child.

During regular Pick Up, stay in the car line, turn off cell phone, unlock doors and wait for your child to be escorted by camp staff to your car.

On the Pick Up Tag (yellow card stock), please print the first and last name of every child you're picking up in a dark colored marker and place it on your car's dash board.

If you forget or lose your tag, please come to the front office with a photo ID.

OFFICE USE ONLY

Date of Entry: _____

RETURN TO: Main Line Art Center, 746 Panmure Road Haverford, PA 19041, or fax to: 610.525.5036

PLEASE PRINT LEGIBLY

YOUR CHILD'S NAME: _____ DATE OF BIRTH: _____ Age: _____

Half Day

Full Day

Before Care

After-Care

Lunch Care

Session(s): _____

Guardian Name(s): _____

Relationship(s): _____

Please fill out the option that applies to your child's pickup schedule. If there is more than one guardian, it is mandatory that all names, phone numbers and designated days be listed!

My spouse or I will be picking up my child.

(Printed) Name: _____ (Signature): _____

Someone other than my spouse or myself will be picking up my child (grandparent, baby-sitter, etc).

Name of person picking my child up: _____ Relationship: _____

Phone #: _____ Designated Pickup Days: _____

Signature (parent/guardian): _____

My child is part of a car pool. The other children in the car pool are (please print legibly):

The driver will be: _____ Phone#: _____

*If there will be more than one driver during the Session, please provide that information below:

Name: _____ #: _____ Days: _____

Name: _____ #: _____ Days: _____

PLEASE SIGN BELOW:

Signed (parent/guardian signature): _____

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