

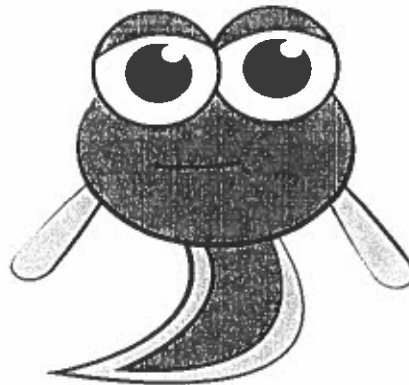
Child & Family Consultants, Inc.

Consent to having your child to be picked up by another person.

Childs Name _____

Parent/Guardian Signature & Date _____

Name of person picking up child _____



Person Signature picking up child

~Need a copy of person license picking up child~