

**SUNRISE CHILDREN'S SCHOOL**  
**CHILD RELEASE FORM**  
(TO BE COMPLETED BY THE CHILD'S PARENT OR GUARDIAN)

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Child's Name \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Individuals permitted to pick-up my child from SCS**

1.	Name _____	Phone _____	
	Address _____	Relationship _____	
2.	Name _____	Phone _____	
	Address _____	Relationship _____	
3.	Name _____	Phone _____	
	Address _____	Relationship _____	
4.	Name _____	Phone _____	
	Address _____	Relationship _____	
5.	Name _____	Phone _____	
	Address _____	Relationship _____	
6.	Name _____	Phone _____	
	Address _____	Relationship _____	

**I GIVE SCS PERMISSION TO RELEASE MY CHILD/CHILDREN TO THE ABOVE NOTED INDIVIDUALS.**

PARENT(S)/GUARDIAN(S) \_\_\_\_\_ DATE \_\_\_\_\_