

**Amherst Community Church Child Care Center  
77 Washington Hwy.  
Amherst, NY 14226  
834-9701**

**Form to Authorize Alternate Pick-Up**

Child's Name: \_\_\_\_\_ Effective date(s): \_\_\_\_\_

Name of Alternate Pick-Up Person: \_\_\_\_\_

Description of Alternate Pick-Up Person: \_\_\_\_\_

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\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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