

<b>Brevard Before &amp; After School</b>  <b>Contact and Departure Information</b>  School Year 2024-2025  <b>Complete only ONE FORM PER FAMILY if the authorized list below applies to every child listed.</b>	First and last name of child(ren) authorized to be released to the individuals below:      
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People on this list may be notified in case of illness or accident and are authorized to pick up the child(ren) listed above. Any changes to the information on this list must be received in writing from either the primary or the secondary account holder.  
**Your child will not be released to anyone not on this list.** Valid photo ID is required.

Primary/secondary account holder name(s) already included on the Enrollment Form (Page 2):	Gender	Relationship	Telephone Contacts (xxx) xxx-xxxx				Acct. #
			Home	Work	Cell		
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pickup
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pickup
Please list all other persons authorized for pick-up: (Person must be at least 18 years old)	Gender	Relationship	Telephone Contacts (xxx) xxx-xxxx				
			Home	Work	Cell		
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up
	<input type="checkbox"/> Male <input type="checkbox"/> Female					<input type="checkbox"/> Emergency Contact	<input type="checkbox"/> Authorized for Pick-up

**Departure/Pick-up Notes:**

**Contact, Authorization, and Departure Information:**

**1)** I am a custodial parent of the child(ren) listed above. All information I have provided on this form is correct. I understand that I am responsible for maintaining current contact, telephone, and PIN information including any changes for all persons authorized for pick-up. I understand children MUST be signed in upon arrival and signed out upon departure by a person authorized for pick-up. I will inform those persons authorized for pick-up to always be prepared to present a valid photo ID (A valid photo ID is a current state, government, or employer issued photo ID that includes the issuer's name and the authorized person's first and last name), to respect the sign-in/sign-out environment as a cell phone free zone, to provide a full legible signature OR know their authorized PIN for electronic sign-in/sign-out. Personal Identification Numbers (PIN) are individual and each number is to be used ONLY by the person to which it is assigned. Unauthorized use of a PIN will result in a warning. Continued misuse may result in discontinuation of the person being authorized to pick-up and may result in termination of services.

**2)** I understand that children do not need to know the emergency code word. (This word will only be used in emergencies that prohibit you from providing written changes to departure information. Emergencies that prohibit you from providing written changes may be accepted if BOTH the following criteria are met: 1) We can contact you at a telephone number listed on the registration form. 2) You can identify the emergency code word indicated.

**3)** Each custodial parent can identify authorized persons for pick-up of their child. If a custodial parent is not the primary account holder and chooses to have additional persons authorized for pick-up, this parent may complete and submit an additional Registration Form Page 4 to the site coordinator and a BAS Parent/Sponsor Request for Information to obtain PIN numbers for the authorized persons. The primary account holder who has access to the automated account management system (EZChildTrack) will not make any changes to these additional names, contact information, or PIN information. Misuse of the parent portal access may result in the termination of services.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date