

Parent Custody Authorization Form

Children will be released to either parent unless we are notified with proper documentation to do otherwise. We cannot withhold a child from a parent unless this procedure is followed. Please complete the form below and attach copies of your documents. Thank you for your cooperation.

Child _____ Date of Birth _____

The following people have restricted access to my child(ren) during the period of _____ through _____.

Explanation of Restriction:

Documents Attached (please list with expiration dates):

Parent Signature _____ Date _____

