

My Village Learning Center
3823 Hamilton Avenue
Baltimore, MD 21206
(410) 426-4428

CHILD RELEASE AUTHORIZATION

The My Village Learning Center is authorized to release my child, _____, to the individuals listed below. I understand that each authorized person must be a minimum of sixteen (16) years of age, and that my child may not leave the Center's property with anyone other than those persons listed below.

Name _____
Address _____

Phone _____
Relationship _____

Name _____
Address _____

Phone _____
Relationship _____

Name _____
Address _____

Phone _____
Relationship _____

Name _____
Address _____

Phone _____
Relationship _____

I certify that the information provided above is complete and accurate, and I agree to notify the center, in writing, if there is any change in the information.

Signature of Parent or Guardian

Date