

Authorisation form for persons authorized to pick up a child occasionally

1. I, the undersigned (*friend, neighbour, grand parent, sister, ...*) : _____

Title: _____

Nature of the relationship to the child: _____

Telephone number : _____

allow the Maison Relais Bridel of the **child** (surname, first name):

to process and keep for the duration of the reception of the child concerned, the data that I provide in this form and to contact me to pick up the designated child in case of necessity (in particular in case of emergency) . For identification and security reasons, I enclose a copy of my identity card so that I can be recognized by the structure when picking up the child. I acknowledge having been informed that I can modify and rectify my data at any time, withdraw my consent and request the deletion of my data by contacting the structure.

Please add a copy of the ID of the authorized person.

Signed in _____ on _____

Signature (authorized person)

2. Name and signature of **parents/guardians** giving the authorization to pick up their child to the person named above:

on (*date of occasional day*) : _____

Surname, first name: _____

Signature : _____

