



Mansfield Parks & Recreation

Family, Fitness & Fun

BEFORE & AFTER SCHOOL FRIENDS 2025/2026

Information provided will be kept onsite and is a hardcopy backup to what is provided upon registration.
It is an additional safety check for our participants.

Child's Name _____
(Please Print)

Parents/Guardians Name _____

Home Phone# _____ Cell Phone# _____

Work Phone# _____

Emergency Contact Name _____

Emergency Contact Phone # _____

CHILD PICKUP AUTHORIZATION

The listed people are authorized to pick up my child from the Mansfield Parks and Recreation Before & After School Program. I understand that staff may ask for identification if they are not certain of the person who is picking up my child. Furthermore, I realize that I may update this form at anytime, but if a name does not appear on this form my child will not be allowed to leave with the unauthorized person.

Parent/Guardian

Signature _____ Date _____

People authorized to pick up my child from After School Program

(use back side of form if needed to list any other names)

Name	Relationship	Phone

Health and/or Miscellaneous Information

Describe any special restrictions and/or considerations for your child.
