

2017 ~ 2018 AUTHORIZATION FOR STUDENT RELEASE

Child's Name: _____ Grade: _____

Home Phone: _____

Mother's Name: _____

Cell#: _____ Work#: _____

Father's Name: _____

Cell#: _____ Work#: _____

For your child's protection, please list the names of authorized persons, including other parents, who may pick up your child from school. Please inform the authorized persons to be prepared to identify themselves to our staff with picture I.D. if necessary.

Name: _____ Phone#: _____

Relationship to child: _____ Cell#: _____

Name: _____ Phone#: _____

Relationship to child: _____ Cell#: _____

Name: _____ Phone#: _____

Relationship to child: _____ Cell#: _____

Name: _____ Phone#: _____

Relationship to child: _____ Cell#: _____

In case of car pool arrangements, designate such on the line "Relationship," or indicate below what the arrangements will be:

**Is there anyone who legally has NO right to pick up your child?
(Official documentation must be on file.)**

Signature: _____

Relationship to the Child: _____

Date: _____