



Student Pick-Up Authorization Form

In an effort to protect our participants, we are asking that you let us know, in advance, who has your permission, other than you, to pick up your child at course end. You may pre-authorize individuals by listing them below. Please let these individuals know that they may be asked to show photo identification if a staff member is unfamiliar with them. Anyone coming to pick up your child who is not on the list will not be allowed to leave with your child unless we have received a prior, written notification from the custodial parents/guardians.

Student Name: _____

Custodial Parents/Guardians: _____ Phone: _____

Address: _____

Authorized Adult to Pick Up Student

1. Name: _____ Phone: _____

Address: _____

Relationship: _____

2. Name: _____ Phone: _____

Address: _____

Relationship: _____

3. Name: _____ Phone: _____

Address: _____

Relationship: _____

Parents/Legal Guardians Authorization

The information above is correct, and I/we hereby give permission for my child to be picked up from the listed individuals. I/we understand that my child will not be released to any individual that is not listed on this form.

_____ Date: _____