

Authorized Pickup

Authorization fo	r alternate pick up for my c	nild/children	
1.	ph#	pin	
	ph#		
3	ph#	pin	
	ph#		
Date(s):	to Specific date or first and last		
acknowledge that authorization form or guardian pick-upa. The individual b. Parents have c. This letter has	t is my responsibility to notify the will be picking up my child. The their child in the event that an picking up the child has proposalled/text the school on the child has proposalled/text the child has	chool by a parent, prior to the	lividual on this sist that a parent red:
Parent signature		Date	
Office Admin		Date	