

Date: _____

I, _____ parent of _____ give
(Parent's Full Name) (Student's Full Name)

permission to the following people to pick up my child at anytime from September 1st 2026 until August 31st 2027. I have provided a picture of each individual and they are required to show ID upon pick up.

1. _____
(Full legal name) (Relation to child)
2. _____
(Full legal name) (Relation to child)
3. _____
(Full legal name) (Relation to child)
4. _____
(Full legal name) (Relation to child)
5. _____
(Full legal name) (Relation to child)
6. _____
(Full legal name) (Relation to child)

Parent's Signature: _____

NOTE: ***(Parents signature must be hand written not digital)**

Pictures of parents and emergency contacts for _____

(Child's Name)

Full Name: _____

Full Name: _____

Full Name: _____

Relation: _____

Relation: _____

Relation: _____

Photo	Photo	Photo
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Full Name: _____

Full Name: _____

Full Name: _____

Relation: _____

Relation: _____

Relation: _____

Photo	Photo	Photo
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Full Name: _____

Full Name: _____

Full Name: _____

Relation: _____

Relation: _____

Relation: _____

Photo	Photo	Photo
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