



## 2018/2019 Student Pick-up Authorization Form

STUDENT NAME(S): \_\_\_\_\_

**THE FOLLOWING PERSON IS AUTHORIZED TO PICK UP MY STUDENT FROM SCHOOL:**

\_\_\_\_\_

(RELATIONSHIP TO STUDENT)

Ongoing for current school year?    \_\_\_Y \_\_\_N

DATE OF PICKUP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

**SPECIAL ARRIVAL/DISMISSAL AUTHORIZATION:**

\_\_\_ Walk or Bike Home    \_\_\_ Walk or Bike to School

Other: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

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(RELATIONSHIP TO STUDENT)

Ongoing for current school year?    \_\_\_Y \_\_\_N

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