



Pick-up Authorization

I, _____, certify that _____
(parent/guardian's name) (Student's name)

may be picked up by the following person(s):

<u>Name</u>	<u>Phone Number</u>
1. _____	_____
2. _____	_____
3. _____	_____

*Note: We will not release your child(ren) to anyone other than the parent/guardian or the persons listed on this form. Individuals should be prepared to show identification. Only legal parents/guardians will be able to make changes to this form.

Additionally, appropriate, legal paperwork such as custody papers must be on file with Dynamic Works if a parent is not allowed to pick up the child.

Signature _____

Date _____