

EMERGENCY AUTHORIZATION TO PICK CHILD UP FROM SCHOOL

Family Name _____ Child's Name _____

Phone numbers: Daytime _____ Work _____

Cell phone _____ Other # where reachable _____

People who are allowed to pick my child up from school. (Please list every person you think might have to pick your child up since other people will not be allowed to take your child without your written permission.)

1. _____ 2. _____

3. _____ 4. _____

Others _____

People who are **never allowed** to pick my child up from school.

1. _____ 2. _____

3. _____ 4. _____

Others _____

People to call in case my child is sick at school. Please list at least four individuals along with their phone numbers.

1st _____
Name Phone Number

2nd _____
Name Phone Number

3rd _____
Name Phone Number

4th _____
Name Phone Number

Who shall we call if none of these people are available? (Please list names along with phone numbers.)

Name Phone Number

Name Phone Number