

# Authorized Individual Pickup List

Date:

Child/Student Name:

Class/Grade:

#	Authorized Individual Name	Relationship	Contact Number	Signature
1	<div></div>	<div></div>	<div></div>	<div></div>
2	<div></div>	<div></div>	<div></div>	<div></div>
3	<div></div>	<div></div>	<div></div>	<div></div>
4	<div></div>	<div></div>	<div></div>	<div></div>

Parent/Guardian Signature: