

## **AUTHORIZED "PICK UP" LIST**

I authorize St. Pius V School to release my son/daughter to the person/people listed below.

I understand that I must contact the school office in order to remove any of the people listed below.

**Name of Student** \_\_\_\_\_ **Date**\_\_\_\_\_

**Name of Parent** \_\_\_\_\_

**Signature of Parent** \_\_\_\_\_

### **Person(s) Approved to Pick-Up Student**

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