



AUTHORIZATION FOR DISMISSAL FORM
2017 - 2018

The following people are authorized to pick up my child from school.
These people are in addition to my child's regular carpool.

Child's Name _____ Grade: _____

<u>Name</u>	<u>Relationship to Child</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signatures:
Mother _____
Father _____