



ESCUELA VIVA
Authorization to Pick Up

I, _____ authorize the individuals listed below to
(Guardian/parent name)
pick up my child, _____,
(Child's name)

from school. I understand that these individuals must show valid picture identification (driver's license or Oregon identification card). This authorization is valid until I submit further notice in writing.

Authorized Individuals:

Name	Relationship to Child
_____	_____
Name	Relationship to Child
_____	_____
Name	Relationship to Child
_____	_____
Name	Relationship to Child
_____	_____
Name	Relationship to Child
_____	_____
Name	Relationship to Child
_____	_____

Parent's Printed Name

Parent Signature

Date