



Resurrection Academy

Authorization for One-Day ONLY Pick-Up

I, (parent/guardian name) _____

the parent/guardian of (student name) _____

permit (adult picking up child) _____

to pick up my child from school today (date) _____.

I may be reached at _____ if questions may occur.

Parent/Guardian Signature _____

Parent/Guardian Name (print) _____

Date _____