

Student Pickup Authorization Form

Please list your alternate family member, friend, or day care provider approved to pick up your student from Sombrero Time. This information will be kept on file so that your student will be released only to those individuals authorized to do so. Please provide name, cell phone number and California drivers license or appropriate picture ID for verification for each alternate. Forms can be hand delivered to your student's teacher or mailed to the address below.

Parent Name: _____

Student/s Name: _____

People authorized by the undersigned to pickup named student/s from Sombrero Time:

Authorized Individual: _____

Cell Phone: _____ CA DL# _____

Authorized Individual: _____

Cell Phone: _____ CA DL# _____

Authorized Individual: _____

Cell Phone: _____ CA DL# _____

Authorized Individual: _____

Cell Phone: _____ CA DL# _____

Parent's Signature: _____ Date: _____