



# Peace Terrace Academy

33330 Peace Terrace ~ Fremont, CA 94555 ~ Phone: (510) 477-9946 ~ Fax: (510) 477-9963

## Student Pick-up / Release Authorization Form 2008-2009

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_

Father/ Guardian Name: \_\_\_\_\_

### Authorized To Pick-Up Student

List below all persons besides parents/guardians, who are authorized to pick up your child from school. NOTE: For your child's safety, all authorized persons will be asked to show photo identification. Please inform the persons on this list in advance on this precautionary measure. Persons may be added to this list or removed at any time, just inform office of any changes to this form.

Name	Relation	Phone #

### Not Authorized to Pick-Up Student

Name	Do they know they cannot pick up child?	Comments

### Please initial all that apply below:

- \_\_\_\_\_ My child may be released ONLY to one of the authorized listed people.
- \_\_\_\_\_ I may occasionally send a friend or relative to pick up my child. If so, I will notify the office by phone or in writing on the day of the change.
- \_\_\_\_\_ I give my child permission to walk or bike home after school.

NOTE: Your child WILL NOT be released to anyone who is not authorized. Authorization will be determined based on this form submitted by the parent. It is the parent's responsibility to keep this information current.

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date