

**AUTHORIZATION TO PICK UP
A CHILD FROM
APEX SCHOOL OF MOVEMENT, SAN DIEGO
(ONLY ONE PER FAMILY NEEDED)**

Name of Child(ren): _____

I, _____ (parent/legal guardian), hereby inform APEX School of Movement, San Diego that the people listed below are authorized to pick up the above named child(ren) at any time. Accordingly, APEX School of Movement, San Diego is hereby instructed to release my child(ren) into the care of the following people whenever they come to APEX School of Movement, San Diego.

To remove authorization for any of the named persons below, written notice must be given to APEX School of Movement, San Diego. An updated copy of this form suffices to fulfill this requirement.

AUTHORIZED PERSONS TO PICK-UP

NAME	RELATIONSHIP TO CHILD	PHONE NUMBER
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

I understand that:

- The "Authorized Person to Pick-Up" **must be at least 18 years old** and may be asked to provide photo ID to staff upon picking up above named child(ren);
- This authorization will remain in force until edited or rescinded in writing by the signers of this authorization.

Authorized by:

Parent or Legal Guardian

Date: _____

Printed Name