(For Office Use Only) Check box if enrolled in:
Fall Enrichment ☐ *Winter Enrichment* ☐
Spring Enrichment ☐

Name of Teacher: _____

THE FALLS CHURCH DAY EPISCOPAL DAY SCHOOL
Authorization for Student Pick Up 2022 - 2023

Name of Student: _____
Last *First*

Name of Parents/Guardians: _____
Last *First*

List the person(s) authorized to pick up your child after school, making this list as inclusive as possible. You may add or subtract names during the school year by notifying the Day School office *in writing*. **Persons on this list unknown to the Day School staff must show picture identification before your child can be released**.

NAME	PHONE	RELATIONSHIP TO CHILD

_____ _____
Parent/Guardian Signature ***Date***