

ISMET/OIA Student Pick-Up Authorization Form

Dear Parents and Guardians, please note that we will not release your child(ren) to any adult other than yourselves without the following explicit written consent and authorization. Also, students are NOT allowed to leave campus on their own, with a friend, or walk/bike home without the following written parental consent and pre-authorization.

Please fill out or cross out any section as applies to your child(ren).

l,		, parents/guardia	ns of,
	rent Name)		(Student Name)
Give my full permissi	ion for	to walk or ride his/her bil	
off campus after sch	ool at the following time	es, and hereby relea	se MET, OIA, and ISMET of any liability.
☐ Any time	☐ Week of		Specific date
Furthermore, I also g ISMET/OIA on any d		or the following fam	ilies/individuals to pick up my child(ren) from
(List Parent Names (Mom AND Dad)			(List ISMET/OIA Student Name)
			·
Parent/Guardian Signature:			Date: