

## GymnasticsEtc

### **“Authorization to Pick-up List”**

The following persons are authorized to pick up my child/children from GymnasticsEtc. I will provide written authorization for any other individual to pick up my child/children.

Participating Child's Name: \_\_\_\_\_

Participating Child's Name: \_\_\_\_\_

Participating Child's Name: \_\_\_\_\_

Participating Child's Name: \_\_\_\_\_

Adult Name: \_\_\_\_\_ relationship to child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ relationship to child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ relationship to child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ relationship to child: \_\_\_\_\_

Signature of Parent (Guardian) \_\_\_\_\_ Date \_\_\_\_\_