## **Pick-up Permission Form**

I, the undersigned as parent/guardian, give the following individual(s) permission to pick up the child(ren) listed below from Wahl-Coates Explorers—4-H Science Club. Any person listed may be asked to provide identification. Any changes to this permission must be in writing. Under NO circumstances can the child(ren) be released to any other person than those listed below without written permission from the parent.

I understand that this permission is valid while my child(ren) are enrolled in Wahl-Coates Explorers—4-H Science Club and that I can modify my permission at any time.

Name(s) of Child(ren)	:	
Name(s) of People wi	th Permission to Pick-up Child(ren): (Please pri	int)
Name	Relation	
Name	Relation	
Name	Relation	
_	to the terms and conditions stated above.	
Parent/Guardian:		
Print Name	Signature	Date



