


  
**HOLY FAMILY**  
 ACADEMY

*601 North Laurel St.*  
*Hazleton, Pa. 18201*  
**(570)455-9431 Fax (570) 455-2847**  
[www.holyfamilyacademy.info](http://www.holyfamilyacademy.info)

**AUTHORIZATION TO PICK UP CHILD 2021-2022**

I/We hereby authorize the person or persons listed below to pick up my/our child from school.

All people included on this list should be over the age of 18 with the exception of older siblings or relations attending Holy Family Academy.

Please notify people on this list that they may be asked to present photo ID at the time of pick up.

**STUDENT NAME** **Grade**

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

Additional names can be included on reverse side of this paper.

Please do not include parent names on this list, except in the case of parent separations/divorce.

- If a parent has SOLE LEGAL CUSTODY of the child, that parent should fill out this form. (Example: If a mother has Sole Legal Custody, she will fill out this form, and she may place the child's father's name on the authorization list).
- Parents who are separated or divorced, but have SHARED LEGAL CUSTODY may both fill out separate forms, if requested by the non-primary physical custodian.

I understand that:

- Parents/Guardians should notify the school through phone call or note whenever there is a change to normal pick up method.
- A copy of all updated court documents regarding custody situations should be on file at the school.
- This authorization shall remain in force unless edited by the signers of this document
- Separated or divorced parents who have shared legal custody can be notified of whom each person has on their authorization list.

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Date)