

Pick – up Authorization form

To provide maximum safety for the children at Wade Christian Academy, we ask you to fill out this form to inform the staff who is allowed to pick – up your child at the end of the day. This form will be kept on file for the duration of your student’s attendance at WCA until updated by you.

Child Name & Grade: _____

Name: _____

Relationship: _____

Cell#: _____

Name: _____

Relationship: _____

Cell#: _____

Name: _____

Relationship: _____

Cell#: _____

Parent’s Signature: _____

Date: _____