

# Form B: Drop-Off and Release Authorization

## Drop-off Authorization

I, \_\_\_\_\_, hereby authorize the following people to drop-off my  
(parent/guardian name)

child, \_\_\_\_\_ at the Travelling Teens Program.  
(child's name/grade)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

## Release Authorization

I, \_\_\_\_\_, hereby authorize my child, \_\_\_\_\_,  
(parent/guardian name) (child's name/grade)

to be released from the Travelling Teens Program by the following individuals. I assume full responsibility for him/her as of the time of dismissal from the program premises.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

**The program MUST be notified immediately if there are any changes to the above authorization. If none of the above individuals are able to sign in/sign out, please provide a written note to the site director on the morning of the desired day.**

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_