2023-2024 PICK-UP AUTHORIZATION

I grant permission for the following	
	imothy's Preschool. Children will not be released
Chil	d's Name
Authorized Person(s):	Relationship to Child:
Pick-Up # Issued Photo Use Authorization I agree that St. Timothy's Preschool staff may use photographs of my child without their name	
and for any lawful purpose, including for exa bulletin and Web content.	mple such purposes as publicity, illustration,
I have read and understand the above:	
Parent's Signature	 Date
5	
Mom's Cell #:	
Dad's Cell #:	