



St. Catherine of Siena School

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Permission for a One Day ONLY Pick Up

I, _____ the parent/guardian of (student name) _____ give permission for (adult picking up child) _____ to pick up my child from school today (date) _____. I may be reached at _____ if any questions may occur.

Parent/Guardian Signature _____

Parent/Guardian Name (print) _____

Date _____

Faith, Excellence, Challenge & Innovation