

FSU iCamp
Student Release & Permission Form

As the parent/guardian of _____, I authorize daily dismissal as outlined below:

Please check the applicable protocol:

_____ **My child must be picked up by one of the following people (list up to 3)**

_____	_____	_____
Name of authorized pick-up	relationship	Phone number

_____	_____	_____
Name of authorized pick-up	relationship	Phone number

_____	_____	_____
Name of authorized pick-up	relationship	Phone number

_____ **My child is authorized to walk home, take the bus, or drive their personal vehicle.**

Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____