



Child Safety Sign-Out Authorization

Authorization is granted to the following individuals to sign this student out of BCC ministries as directed by the Parent/Agency/Representative/Guardian.

Student _____ DOB _____ Grade _____

1. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____	2. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____
3. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____	4. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____
5. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____	6. Authorized Person _____ Relationship to Student _____ Home Phone _____ Mobile Phone _____

Other Authorizations (medical, etc.)

Authorized By

Print Name: _____

Signature: _____

Relationship to Student: _____ Date _____