



## Authorization for Pick Up Form

At Helping Hands First Aid Training, your child's safety is our primary concern. By signing this form you acknowledge that your child will be picked up by someone other than you the parent or legal guardian of this child. Helping Hands First Aid Training assumes no liability in having this child picked up by another individual at the completion of their training.

Child's name: \_\_\_\_\_

Name of Adult picking up your child: \_\_\_\_\_

Relationship of individual to your child: \_\_\_\_\_

Parent or Legal Guardians Name (Print): \_\_\_\_\_

Parent or Legal Guardians Signature: \_\_\_\_\_

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