

Henrico County Public Schools
STUDENT ENROLLMENT FORM

FOR OFFICE USE ONLY: ENROLL DATE: _____
ST. # _____ GRADE: _____
COUNSELOR: _____ HR #: _____

Authorization to Pick-Up

Moody Middle

School Name

Student's Name

Grade

Homeroom Teacher

Moody Middle

Parent and/or guardian

give permission for

School Name

to release my child to the persons named below. I understand that no other authorization will be necessary for the persons named below to leave school property with my child. I understand any changes to this form will require a new form to be completed. I also understand that all persons listed below must be at least 18 years of age.

Mother/Female Guardian

Name

Father/Male Guardian

Name

(Relationship to Student)

Name

(Relationship to Student)

Name

(Relationship to Student)

Name

(Relationship to Student)

Name

Parent/Guardian Signature

(Must be signed in the presence of a school official)

Date

School Official

Date

Identification MUST be requested each time one of the above mention adults picks student up from school. The student MUST be signed out. This form is valid from the date of signature through the last day of the current school year, unless replaced at the request of the Parent/Guardian. A form must be completed for each student.