



# HELLENIC AMERICAN ACADEMY

41 Broadway Street, Lowell, MA 01854  
Telephone: 978-453-5422 Fax: 978-970-3554  
[www.hellenicamericanacademy.com](http://www.hellenicamericanacademy.com)

## Pick-Up Authorization

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

The following people are authorized to pick-up the above named student. Please list first the person who most often picks up the child.

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| Name | Relationship | Phone # |
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| Name | Relationship | Phone # |
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| Name | Relationship | Phone # |
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| Name | Relationship | Phone # |
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| Name | Relationship | Phone # |
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In the event a person not listed above is to pick up the child you must contact the school office via telephone, email, or note the morning of the day in question. A photo ID will be required at pick-up.

Thank you