



PICK UP AUTHORIZATION FORM

To: _____
(teacher's name)

Date: _____

I _____ give permission for **COLISEO DE LAS ARTES** whose names and copies of driver's license are attached, to pick up my child _____.

COLISEO DE LAS ARTES is in 4180 SW 74th Court , Miami Fl 33155
The Director is Roxana Pollo, who can be contacted at 786 - 587 4190.

Persons not mentioned on this attachement do not have permission to pick up my child on behalf of Athena Dance Academy.

Parent/Guardian Signature

Coliseo de las Artes / Roxana Pollo, Director