

# Cain Center for the Arts

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## Authorization Form to Pick Up Participant

Program / Activity / Camp: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

I (Parent / Guardian Name), \_\_\_\_\_ authorize the following person(s) to pick up the participant named above for the listed program, activity, summer camp or event sponsored by the Cain Center for the Arts. I understand and agree that without written authorization from me the participant will not be released to anyone who is not listed on this form. I understand that individuals who are authorized to pick-up this participant must provide a photo ID at sign-out.

Parent / Guardian Signature: \_\_\_\_\_

Person(s) authorized to pick up participant:

1.		
2.		
3.		
4.		
5.		