



### **ETIP Authorized Student Drop Off / Pick Up Information**

If an emergency arises, the following individuals are authorized to drop off and/or pick up my child from Early Talent Identification Programming.

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

To the best of my knowledge, the information contained above is true, complete, and accurate.

I understand that if any of the information above should change, a new ETIP Authorized Student Drop Off / Pick Up Information will be submitted to the Early Talent Identification Program at Paul Quinn College as soon as possible.

**Signature of Parent :** \_\_\_\_\_

**Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_