

Office Use Only
Date Received: _____
Received by: _____

Westside Baptist Academy

3883 Lakes of Bridgewater Dr.
Katy, Texas 77449
School Office and Fax (281) 492 - 3448



Pick - Up Permission Slip

I give _____ (Adult 's Full Name) permission to pick up my child
_____ (Student full name) from Westside Baptist Academy.

Please check the appropriate box below:

- { } This will be an ongoing pick up arrangement until I state otherwise in writing.
- { } This pick up will be only for today ___ / ___ / _____
- { } This pick up will be from ___ / ___ / _____ to ___ / ___ / _____

Parent Printed Name: _____ Parent Signature: _____

Administrator Signature: _____ Date: _____

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