ST. PAUL CATHOLIC SCHOOL
140 Walnut St.
Weirton, WV 26062
Office: 304-748-5225
Fax: 304-748-4163
weirtonstpauls.org

For the safety of all of our students, each family is required to fill out the following form. Please contact the office with any questions.

Family Name: _____

Authorized Pick Up #1 Name _____ Vehicle Make_____

Relationship to Student _____Vehicle Color _____

Phone Number _____

Authorized Pick Up #2 Name _____ Vehicle Make_____

Relationship to Student _____Vehicle Color _____

Phone Number _____

Authorized Pick Up #3 Name _____ Vehicle Make_____

Relationship to Student _____Vehicle Color _____

Phone Number _____

Authorized Pick Up #4 Name _____ Vehicle Make_____

Relationship to Student _____Vehicle Color _____

Phone Number _____

Authorized Pick Up #5 Name _____ Vehicle Make_____

Relationship to Student _____Vehicle Color _____

Phone Number _____

This form **DOES NOT** substitute or replace the use of the pick-up name paper. Name papers must be displayed in car windows at all times during pick-up. Please contact the office if additional name papers are needed

I understand that it is my responsibility to contact the school office if changes occur with the information provided. I understand that my child will only be dismissed to persons listed on this form.

Parent Signature _____ Date: _____