

# Mountain Ridge High School



## Notice of Authorization to Depart-Student Medical/Emergency Release Form

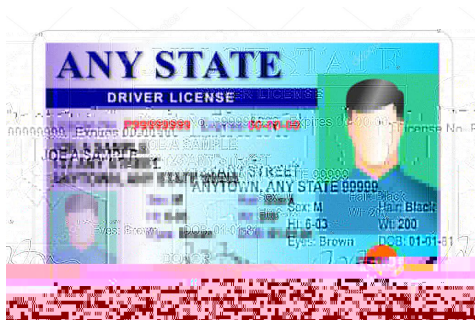
I \_\_\_\_\_ parent/guardian of \_\_\_\_\_  
Parent/Guardian Student's Name

Give my authorization to allow \_\_\_\_\_  
Person picking up Student Relationship to Student

To sign out my student for early release.

Today's date: \_\_\_\_\_ Time to leave: \_\_\_\_\_ Reason: \_\_\_\_\_ Illness  
\_\_\_\_\_ Personal

Parent/Guardian, please attach a CLEAR copy of your Driver's License in the space BELOW and email the form to: [MR-](#)



Forms are NOT kept on file. Please send in a new form and driver's license [the day of the early release.](#)

No student will be released without this form and copy of parent/guardian's driver's license.

Parent/Guardian's Signature \_\_\_\_\_

Phone # \_\_\_\_\_