



Iowa RYLA Pick Up Authorization Form

Please bring this form to the conference and turn in during check in.

Conferee's Name _____

The following people (please include yourself) are authorized to pick up my child from RYLA. I understand my child will be allowed to leave with these individuals only. I also understand that the person picking up my child must do so in person. Conferees will not be allowed to leave without being signed out. Photo identification may be asked for.

Authorized Person's Name (please print clearly)	Relationship to Conferee	Phone number

Conferee will be driving to and from RYLA. Yes No (circle answer)

Name of person(s) NOT authorized to pick up my child: _____

Comments: _____

Parent/Guardian Signature: _____ Date: _____

If plans change after you submit this form and you need to add someone to the approved list above please call Patt Englander, 2023 Conference Chair at (563) 676-9600 by WEDNESDAY, July 19th.