



Thayer  
Symphony  
Orchestra

**“Your Performing Arts Institution”**

Toshimasa Francis Wada  
Artistic Director

**COMMUNITY MUSIC SCHOOL  
AUTHORIZATION FORM FOR STUDENT PICK UP**

A parent/guardian must complete this form to give permission to other individuals to pick up his/her child/children from the Community Music School. Photo ID will be requested.

I, \_\_\_\_\_ authorize the following individual(s) to pick up my child/children from the Community Music School.

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Name of Authorized Driver

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

\_\_\_\_\_  
Name of Authorized Driver

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

\_\_\_\_\_  
Name of Authorized Driver

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

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



14 Monument Square, Fourth Floor, Leominster, MA 01453  
Tel. 978.466.1800 🎵 Fax 978.840.1000  
www.thayersymphony.org

