

Applicant Name: _____

CADET SIGN-OUT AUTHORIZATION

Class 53/2025-2

The individuals listed below have my/our permission to sign-out my/our cadet for medical appointments, job interviews or other events that may occur during the residential phase from July 13 through December 13. **Please include parents**, guardians, stepparents, grandparents, mentors, case workers, etc. Please print legibly and do not list anyone **under the age of 21**.

If it becomes necessary for a person not listed on this form to transport your cadet, a notarized letter stating the name, age and relationship to the cadet, date and purpose of transporting the cadet must be on file at MYCA **prior to individual being allowed to take a cadet off-site**.

IT IS NOT ASSUMED PARENTS ARE ALLOWED TO PICK UP YOUTH. PLEASE BE SURE TO LIST PARENTS/GUARDIANS.

Cadet Name: _____

NAME	AGE	RELATIONSHIP TO CADET	CONTACT NUMBER

If cadet is released from program for any reason, it is the responsibility of the parent/legal guardian to make arrangements to have cadet picked-up within 6 hour of being notified by MYCA staff of dismissal.

MYCA staff member will **NOT** release cadets to any person not listed on this form and verified by current driver's license/ photo ID at time of sign-out.

Printed name: _____

Signature: _____

Date: _____