KINDERGARTEN WALKING WAIVER

I, ________________________________________, parent/guardian of the following student,

__________________________________, from school _______________________________

(Student Name)                                                                                              (School Name)

on bus # ____________________, give my permission for the above kindergarten child to walk

home from the bus stop at ______________________________________________ with either

(Location)

an older sibling _______________________________________________________________

(Name)

-OR-

Any one of the following names (Adults – 18 years or older) listed below:

1) ______________________________________ Phone _________________

2) ______________________________________ Phone _________________

3) ______________________________________ Phone _________________

The above names will be verified by the driver when a current picture I.D. is shown. We will not release the student until proper identification is shown. We will not release the student if the name is not on our list of the above adults. The adults have to be 18 years or older.

___________________________________  ____________________  ________________

(Parent Signature)            (Phone)                (Date)

___________________________________                                            ________________

(Driver Signature)                                                                  (Date)

Additional Information:____________________________________________________________

____________________________________________________________________________

____________________________________________________________________________