KINDERGARTEN WALKING WAIVER

I, ________________________________________, parent/guardian of the following student,
__________________________________, from school _______________________________
(Child’s Name)                                                                                              (Name of School)
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) ________________________________________________
2) ________________________________________________
3) ________________________________________________

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)                                                                                              (Date)

_________________________________________  ________ _____________________
(Driver Signature)                                                                                              (Date)

Additional Information:__________________________________________________________
____________________________________________________________________________
____________________________________________________________________________