



Grade _____

Route # _____

K-2nd GRADE RELEASE FORM

Please fill out and return to bus driver.

Student's Name: _____ Bus Stop: _____

Parent's Phone Numbers: _____

Please provide the names, relationships and phone numbers of EVERYONE who is authorized to meet your child at the bus stop.

NAME	Relationship to Student	Phone Number

Parent/Guardian (Print) _____

Parent/Guardian (Signature) _____ Date _____

*****COMPLETE THIS BOTTOM SECTION ONLY IF YOU CHOOSE NOT TO HAVE SOMEONE MEET YOUR CHILD AT THE BUS STOP*****

My child has permission to walk home alone and I take full responsibility for my Child's safety upon departing the school bus. I understand that this is NOT a recommended procedure of Prescott Valley School.

Parent/Guardian (Print) _____

Parent/Guardian (Signature) _____ Date _____