

SACO SCHOOL

DISTRICT 12 A & B

EDUCATION WITH TRADITION AND TECHNOLOGY

P.O. Box 298
321 Highway 243
Saco, MT 59261

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PARENTS OF ROUTE BUS STUDENTS:

IF YOU WISH TO ALLOW YOUR MINOR CHILD/CHILDREN TO BE DROPPED OFF AT YOUR RESIDENCE WHEN YOU ARE NOT AT HOME OR IF YOU WISH TO ALLOW THAT CHILD/CHILDREN TO BE DROPPED OFF AT A RESIDENCE OTHER THAN YOUR OWN, PLEASE COMPLETE THIS FORM AND RETURN TO THE DISTRICT OFFICE.

I hereby give my permission for my minor child/children _____

to be dropped off:

1. _____ Unsupervised at my residence
2. _____ At (name and address) _____ a supervised residence other than my own.
3. _____ At (name and address) _____ an unsupervised residence other than my own. I understand that adults may not be present for up to _____ (minutes/hours).
4. _____ Other (explain) _____

I HEREBY RELEASE SACO PUBLIC SCHOOL AND THE BUS DRIVER FROM ALL LIABILITY.

This release is in effect on _____ or for the _____ school year.

Parent signature _____ Date _____

Printed Name _____

Home phone number _____

Work phone number _____