



2016-17

SCHOOL BUS DROP OFF

3RD & 4TH GRADE AUTHORIZATION FORM

I give the Oyster River Cooperative School District Transportation Office permission to drop off my 3rd/4th grade child _____, without the presence of an adult to receive him/her at the bus stop. The period of time that this Authorization is in effect is from:

Beginning Date: _____ **End Date:** _____

I acknowledge that the Oyster River Cooperative School District cannot insure the safety of my student once he/she exits the school bus and release the Oyster River School District of any responsibility for my student's welfare once he/she exits the school bus.

School my child attends: _____ **Mast Way** _____ **Moharimet** **Grade:** _____

Print Name: _____

Signature: _____ Date: _____

**ONLY COMPLETE THIS FORM IF YOU WANT TRANSPORTATION TO
RELEASE YOUR CHILD WITHOUT THE PRESENCE OF A
RESPONSIBLE PERSON.**