



**KINDERGARTEN PARENT ALTERNATE(S) AT STOP**

BUS NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_

STUDENT'S NAME (PLEASE PRINT): \_\_\_\_\_

TEACHER: \_\_\_\_\_

I, \_\_\_\_\_, parent guardian of  
*(Parent/Guardian Name)*

\_\_\_\_\_ give my permission for my child to get  
*(Student Name)*

off of the bus with the following people:

Name:	Relationship:	Contact Info:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PARENT SIGNATURE:** \_\_\_\_\_

Please sign and return to the Ridgeview Office. A copy will be kept in the office and on your child's school bus.