

STUDENT WALKER APPLICATION 2024-2025

Student Name: _____ **Pride:** _____ **Grade:** _____

Parent / Guardian Name: _____

Address: _____

Home Phone Number: _____

Does this application include providing permission for this student to walk a younger sibling (in grades 5-6) who lives in the same residence to school?

Yes: _____ **No:** _____

If “Yes,” list the names of the siblings and their corresponding Prides and grade levels below:

Name: _____ **Pride:** _____ **Grade:** _____

Name: _____ **Pride:** _____ **Grade:** _____

Name: _____ **Pride:** _____ **Grade:** _____

Special Considerations: If you would like to make a request that is different from or not covered under the current HC Student Walker Policy, please explain that request below. *(Special considerations will be reviewed and considered for possible approval by HC Operations on a case-by-case basis.)*

By signing below, I certify that I have read and agree with the following statements and hereby give my approval for my student to be a walker to and from Henderson Collegiate Middle / High School (located at 1071 Old Epsom Rd. in Henderson, NC):

- I recognize that there are risks associated with walking to school which can be hazardous and dangerous. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s walking to school (“Claims”). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Henderson Collegiate, its employees, board, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto.
- I understand that walking to school is a privilege and that if my student does not follow the expectations outlined in the Student Walker policy, then his / her walking privileges may not be approved, or may be revoked.

Signature: _____ **Date:** _____