Wallburg Elementary School
205 Motsinger Road
Winston-Salem, NC 27107
Telephone: (336) 769-2921
Fax: (336) 769-0967

Dear _____:

Re: _____

We have received your request for _____ to be dropped off at
(student's name)

_____
(Bus stop address)

bus stop in the event that a parent, legal guardian, or adult of suitable age is not present to immediately supervise the student upon departure from the school bus. We strongly encourage your child to be supervised by a parent, legal guardian, or an adult of suitable age at all times. In order to honor your request, please read and execute the enclosed Authorization and Release in front of a Notary Public and return to your child's school.

Sincerely,

Paulette Tetteris, Bus Coordinator/Assistant Principal

Enclosure

AUTHORIZATION AND RELEASE

Wallburg Elementary School

205 Motsinger Road, Winston-Salem, NC 27107
Phone: (336) 769-2921 Fax: (336) 769-0967

By signing below I indicate that I have the understanding and capacity to communicate decisions concerning my child, _____ and that I am fully
(student's name)
informed as to the contents of this document and understand the full import of this document. I am requesting that _____ be dropped off at
(student's name)

_____
(Bus stop address)
in the event that a parent, legal guardian, or adult of suitable age is not present to immediately supervise the student upon their departure from the school bus. I further agree to release, indemnify, and hold harmless all Administrators, Teachers, faculty members, bus drivers, and agents of same at Wallburg School and the Davidson County Board of Education from any and all claims and liability for injuries or other damages which may occur as a result of honoring this request and which are in any way connected to or related to this request.

Parent/Legal Guardian Printed Name: _____

Signed: _____ Dated: _____

NORTH CAROLINA
DAVIDSON COUNTY

I, _____, a Notary Public do hereby certify that _____, personally appeared before me and acknowledged the due execution of the foregoing instrument.

This the _____ day _____, 20____.

_____
Notary Public
(Official Seal) My Commission Expires: _____