

**ROWLAND UNIFIED SCHOOL DISTRICT  
TRANSPORTATION DEPARTMENT  
RELEASE FORM/WALK NOTICE**

The Transportation Department requests your help in implementing our procedures for releasing kindergarten students and/or students' with special needs. Please fill out the following **(PRINT)**:

STUDENT: \_\_\_\_\_ SCHOOL: \_\_\_\_\_  
Parent or Guardian: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Route # \_\_\_\_\_ Bus Stop: \_\_\_\_\_

Please check one of the boxes below:

- My child has permission to walk home by himself/herself.
- My child may walk home from the bus stop with a sibling.
- My child will be met daily by an adult noted below. IF YOUR CHILD IS NOT MET AT THE BUS STOP, HE/SHE WILL REMAIN ON THE BUS UNTIL ALL OTHER STUDENTS HAVE BEEN DROPPED OFF OR BE RETURNED TO SCHOOL. IT WILL THEN BE YOUR RESPONSIBILITY TO PICK UP YOUR CHILD FROM SCHOOL. Please list any persons who are allowed to pick up your child:

Name (First, Last)	Relationship
Name (First, Last)	Relationship
Name (First, Last)	Relationship

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Assumption of Risk

I understand there are risks of injury, death, and damage to property from allowing my kindergarten child or child with special needs to be walked home from the bus stop with his/her older sibling or to walk home by himself/herself. In consideration for having my kindergarten child or child with special needs walked home with his/her older sibling or by himself/herself, I hereby assume the risk of, and responsibility for, any such injury, death or damage which I (or any minor on whose behalf I am signing) may sustain arising out of or in any way connected with my kindergarten child or child with special needs being walked home from the bus stop by his/her older sibling or by himself/herself, including injury, death, or damage resulting from any acts or omissions, whether negligent or not, by the Rowland Unified School District.

Release and Indemnification

In consideration for having my kindergarten child or child with special needs, walked home from the bus stop by his/her older sibling or by himself/herself, I (or any minor on whose behalf I am signing) hereby waive, and release, and agree to indemnify and hold harmless, the Rowland Unified School District, its Governing Board, officers, employees, agents, and volunteers, from any and all liability, claims, or causes of action, including wrongful death, which may arise out of or an any way be connected with allowing my kindergarten child or child with special needs to be walked home from the bus stop by his/her older sibling or by himself/herself, including the passive negligence of the Rowland Unified School District, its officials, officers, employees, volunteers, and agents. The indemnification includes, without limitation, the payment of all fines, judgments, awards, decrees, attorney's fees, and related costs or expenses, and the reimbursement of the Rowland Unified School District, its Governing Board, officers, employees, agents, and/or volunteers for all legal expenses and costs incurred by each of them.

Knowing and Voluntary Execution

**I have carefully read this Waiver, Release, and Indemnity Form and fully understand its contents. I understand that I am giving up valuable legal rights and I knowingly and voluntarily give up these rights of my own free will. I agree to this Wavier, Release, and Indemnity on behalf of myself, my heirs, executors, administrators, assigns, and all minor children on whose behalf I sign this instrument**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_