



RUTHERFORD PUBLIC SCHOOLS

Jack Hurley
Superintendent of Schools

Joseph Kelly
Business Administrator / Board Secretary

PARENT/GUARDIAN PERMISSION

I hereby give my permission for _____ to participate in the courtesy/subscription busing. I understand that my child will abide by all rules and regulations governing student conduct.

Date of Activity: 2020 – 2021 School Year

Transportation: Courtesy School Bus

Purpose/Destination: Between Pierrepont and Union Schools

Home Telephone: _____

Teacher: _____

Grade: _____

Emergency Contact:

(Name)

Telephone Emergency Contact

***Signature of Parent / Guardian**

OPTIONAL: Medical Treatment:

I give permission to the teacher in charge to authorize emergency medical treatment and release said teacher from any personal liability resulting from such treatment.

Signature Parent/Guardian