

Kindergarten Center, Lincoln School & Washington School

Dismissal Authorization

I give permission for my child, _____, to leave school grounds with the following individual(s):

<u>Name:</u>	<u>Relationship</u>	<u>Contact Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand and agree that the Rutherford Board of Education ("Board"), its officers, agents and employees are not responsible, nor does the Board assume liability for any injuries, losses or damages related to and/or resulting from my decision to have my child released to the individuals listed in this Authorization. As such, I am accepting full responsibility for any injury, loss or damage which may occur in connection with the release of my child to the individuals listed in this Authorization. I hereby indemnify, release and hold the Board, its officers, agents and employees harmless from any liability, loss, damage, claims or actions, including reimbursement of reasonable attorney's fees, that may arise out of and in connection with my decision to authorize the release of my child to the individuals listed in this Authorization.

This Authorization shall be valid for the entire school year, unless I advise the Principal in writing otherwise.

If the child has more than one parent/legal guardian with legal custody of the child, both shall sign this release form, and the reference to "I" or "my" throughout shall refer to each parent/legal guardian signing the form.

A separate form must be completed for each child.

Print Name of Student

Print Name of Parent/Legal Guardian

Print Name of Parent/Legal Guardian

Home Address

Home Phone

Emergency Phone

Signatures:

Witness*

Parent/Legal Guardian

Dated:

Dated:

Witness*

Parent/Legal Guardian

Dated:

Dated:

*Must be witnessed by an adult who is not a school employee.