

DROP OFF/PICK UP PARENT PERMISSION FORM

This form with a valid picture ID has to be presented to the main teacher at dismissal time.

I, _____ (Name of Legal Guardian) give my permission for _____ (Son/Daughter) to be

- a. dropped off at the Czech School of California classes
- b. picked up from the Czech School of California Classes by people named below:
 - 1. Name: _____
 - 2. Name: _____
 - 3. Name: _____
 - 4. Name: _____

If one of the parents has a legal custody over the child, please fill out the following part of this form.

I, _____ (Name of Legal Guardian) give my permission for _____ (Son/Daughter) to be

- a. dropped off at the Czech School of California classes
- b. picked up from the Czech School of California Classes by his/her father: (name of the father) _____
mother: (name of the mother) _____

on the following days (MM/DD/YY): _____

I hereby release, discharge and indemnify Czech School of California, its administration, staff, employees, officers, directors, volunteers, insurers, agents, and representatives from any and all claims, causes of action, liability or damages arising out of, or relating to the transportation of my child.

Name (Printed): _____

Signature: _____ Date: _____