



Transportation 4k Release Form

I request that you release _____ to the bearer of this form. I understand by signing this release that I am aware and take full responsibility for my child. By signing this form, I hold harmless First Student and Racine Unified School District of any liability upon being released from the bus. I understand that the person is required to present this form in order for my student to be released.

_____ Phone (____) ____ - ____
Print Name Sign Name



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