

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.		
Print Name	Sign Name	Phone ()
RACINE UNIFIED SCHOOL DISTRICT		
Transportation 4k Release Form		
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