



Student Walker Permission Slip

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian, who authorized (please print): \_\_\_\_\_

By signing this waiver, I authorize my child/ren listed above to walk/bike to or from school, or walk/bike to the designated places listed below. Please note that this grants permission for my child/ren to arrive and leave school without adult supervision.

This permission slip is only valid for the 2019-2020 school year.

Please note the names of any additional younger siblings that will be walking with the student name listed above:

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Authorized designated places my child is authorized to walk/bike to after school:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_