



MONTESSORI REGIONAL CHARTER SCHOOL  
**2011-2012 TRANSPORTATION AUTHORIZATION FORM**

**FAMILY NAME:** \_\_\_\_\_

<b>MY CHILD(REN):</b>	<b>GRADE:</b>	<b>CAMPUS: (Circle One)</b>
_____	_____	N                      S
_____	_____	N                      S
_____	_____	N                      S
_____	_____	N                      S

**WILL BE TRANSPORTED TO AND FROM SCHOOL AS FOLLOWS:**

Morning Drop Off (Circle One)	BUS: _____ <b>OR</b> CAR POOL	Name of District _____
Afternoon Pick Up (Circle One)	BUS: _____ <b>OR</b> CAR POOL	Name of District _____

**THE FOLLOWING INDIVIDUALS ARE AUTHORIZED TO PICK UP MY CHILD:**

Name/Relationship	Color/Make/Model of Car

**YOUR SIGNATURE/DATE BELOW IS CONFIRMATION THAT YOU HAVE READ AND UNDERSTAND THE FOLLOWING STATEMENT:**

**I have read and understand the Guidelines for Student Dismissal on the reverse side of this form.**

I authorize the adults listed above to pick up my child(ren) at the end of the regularly scheduled school day in the car pool line. These adults must have car seats required by law (under 80 lbs/ 8 years old) to safely transport my child. To ensure student and staff safety, I agree to restrain family pets so they will not interfere with students being assisted into or out of a vehicle. For the safety and security of my child, MRCS may request appropriate identification from any individual picking up my child if the staff is not familiar with the vehicle or individual.

\_\_\_\_\_  
**Name of Parent/Guardian - PLEASE PRINT**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**