

STUDENT RELEASE FORM

I, _____
Parent/Guardian Name

give the following permission(s) for my child,

Student Name

(Please check and sign all that apply)

- My child can leave the RSM-MetroWest Premises without adult supervision when he/she is released from class. I certify that he/she is 12 years of age at the time I sign this form.

_____ date _____
Parent/Guardian Signature

- My child can stay in the waiting room unattended until picked up at the later than usual time. MWSM reserves the right to rescind this agreement if unattended children are being loud or disruptive while waiting unattended.

_____ date _____
Parent/Guardian Signature

- My child can be picked up by the following authorized adults:

Authorized adult name

Authorized adult name

Authorized adult name

Authorized adult name

I understand that MWSM is not liable for my child's safety once the child is released from the class.

_____ date _____
Parent/Guardian Signature