

Duanesburg Elementary

Date Effective: _____

Please allow my child _____ /Teacher: _____

TO: 1) ride bus route _____ and get off at _____

OR

2) be released to _____ at(time) _____

Instead of: 1) _____ riding bus route _____

2) _____ going to the YMCA Child Care program

3) _____ going to the TSL Child Care program

4) _____ being picked up

Parent's Signature: _____ phone # _____

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