M	Date:	
Mehlville School District Transportation	Home School:	
	Route #:	

## My child \_\_\_\_\_\_ may get off the bus, at their stop **ONLY**, with:

(Please name and relation to student, if you need more space please use the back of this form)

Name	Relationship to student	Phone #
_1)		
2)		
3)		
4)		
_5)		
7)		
0)		
0)		
10)		

\*Please meet your child at the bus <u>door</u> to be released from the bus\*

\*\*All KG students MUST have a form in order to be released from the bus without the driver checking with our office\*\*\*

Parent or Guardian Printed Name

Parent or Guardian Signature