

**WENTZVILLE R-IV SCHOOL DISTRICT
AUTHORIZED STUDENT RELEASE FORM**

I authorize my child to be released to the following person(s) from the bus stop with proper photo identification.

Student's Name _____

<u>NAME(S)</u>	<u>RELATIONSHIP</u>
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Printed Name of Parent or Legal Guardian _____

Signature of Parent or Legal Guardian _____

Date _____

Bus Driver _____

Route # _____