RELEASE OF RESPONSIBILITY FOR LOS ANGELES UNIFIED SCHOOL DISTRICT TO PICK UP/DELIVER STUDENT AT A STOP OTHER THAN THE REGULARLY ASSIGNED STOP.

TO: DR. DELING
    NORTH HOLLYWOOD HS HGM
    (PRINCIPAL)    (RECEIVING SCHOOL)

I, ___________________________________________, agree to hold harmless and indemnify the Los Angeles Unified School District, and its offices, employees or anyone acting for the District, legally, financially or otherwise as against all injury or other damage incurred by me or my child as a result of the District's permitting my child, ____________________________________________

I.D. #__________________________

(STUDENT NAME)

to board the school bus at______________________________

(PICKUP LOCATION)

Route #____________________, Time:____________________ A.M. and/or leave the bus at

______________________________

(DROPOFF LOCATION)

Route #______________, Time:__________ P.M.

Effective ______/_____/______ through ______/_____/_______.

DATE     DATE

This dual stop will be used on the following days (e.g., 1st/3rd Wed. or Mon./Thurs. only, etc.)

__________________________________________________________

Days(s) of week assigned

With this request, I confirm that my child does not require extra supervision at the dual stop location. I will take full responsibility for my child's safety before he/she boards the bus and after he/she leaves the bus at the dual stop location.

This request is made with my agreement to the conditions stated above and my understanding that the District is not obligated to provide a dual stop for my child and that such dual stop is an exception to the rule of having a single regularly assigned stop for each student.

________________________________________       DATE: _________________

(SIGNATURE OF PARENT OR GUARDIAN)

________________________________________       DATE: _________________

(PRINCIPAL'S SIGNATURE)

Distribution: Original/Principal - Canary/Dispatch - Pink/ABS - Goldenrod/Parent

FORM 78.223a (Revised 11/88)