



# The Nest

## 2010-11 Franklin County School

### After School Program Bus Form

Student Name: Last \_\_\_\_\_ First \_\_\_\_\_

Will be riding The Nest after school bus to (Check One):

\_\_\_\_\_ **Eastpoint** (Franklin County School District offices, gymnasium parking area, 85 School Rd)

**Drop Off Time: 6:10 p.m.**

\_\_\_\_\_ **Apalachicola** (Franklin County Health Department, Corner of 12<sup>th</sup> Street and Hwy. 98)

**Drop Off Time: 6:20 p.m.**

By signing below, I understand that I, or the authorized persons identified in my child's enrollment application, will pick my child up at the time and location listed above. If I choose to pick up my child at the Franklin County School instead, I must notify site director Jhaki Davis, 850-670-2820, by 3:30 p.m. The after school program ends at 6 p.m. each day.

Parent/Guardian Name (Please print) \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Permission to walk home

\_\_\_\_\_ I give my child permission to walk home from the bus stop. By signing below, I forfeit the right to hold The Nest staff accountable should my child be harmed or injured while walking home from the bus stop.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Contact Information

In the event that a child is not picked up at the designated time and bus stop, please provide emergency contact information.

Name	Home Phone	Cell Phone	Work Phone	Relation to child
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____