



## Unsupervised Child Release Form

Student's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date/s of release: From: \_\_\_\_\_ To: \_\_\_\_\_ Day/s of release:  M T W TR F   
DD/MM/YY DD/MM/YY (circle all that apply)

Requested release time: \_\_\_\_\_ Will this release occur every week? YES \_\_\_\_\_ NO \_\_\_\_\_

Reason for release request:

- I understand by signing this form I give Central Point permission allow my child to leave school unsupervised on the day/s and time/s indicated above. I hereby release Central Point from the responsibility for any mishap, injury or situation that may place my child in danger due to being unsupervised. I accept full responsibility for my child once off school premises.
- I promise to notify Central Point of any changes in the day/s or time/s of the unsupervised period

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

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Notice to Discontinue Unsupervised Child Release

Today's Date: \_\_\_\_\_

Date/s to stop release: \_\_\_\_\_ Day/s to stop release: \_\_\_\_\_

Is the discontinuation permanent? YES \_\_\_\_\_ NO \_\_\_\_\_ If no, when will the unsupervised release resume? \_\_\_\_\_  
DD/MM/YY

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

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Special Notes