

Archway Classical Academy North Phoenix 2019-20 Student Walking/Biking Waiver

| l | , parent/guardian of |
|----------------------------------|------------------------------------|
| | in grade, |
| (student's first and last name) | (2019-20 school year) |
| give my permission for the above | named child to walk/ride bike home |
| from school. | |

I understand that by signing this waiver and allowing my child to walk/ride bike home from Archway Classical Academy North Phoenix that Archway Classical Academy North Phoenix is not responsible for monitoring the safety of my student. Archway Classical Academy North Phoenix will allow my student to walk/ride bike home unless written notice is provided to the front office stating they must be picked up by an authorized person.

Parent Signature

Date

A copy of this waiver will be kept on file in the front office and with the student's teacher. Please fill out one from per student and return it to the front office.