

Brace Bus Rider Policies

As a part of our commitment to providing your family with exceptional service, the Girdwood Orthodontics team is excited to provide our complimentary patient transportation service, The Girdwood Orthodontics "Brace Bus". We will pick students up from Lebanon area schools, bring them to their orthodontic appointment and then return them to school after their appointment for you! This decreases the amount of school time children miss for appointments, but most importantly to free up schedules for our great parents.

In effort to serve you most effectively, we just ask that you adhere to the following guidelines and policies:

- 1. Patient's parent/legal guardian must complete and sign both the School Transportation form and Request for Transportation Authorization form in order to benefit from this service.
- 2. "Brace Bus" appointments are scheduled on a first come basis, both parents working and good financial standing. Accounts that become delinquent are not eligible for this service until the account is paid current. Our front desk will make every effort to schedule all of your child's appointments so they may ride the Brace Bus.
- 3. The Brace Bus will run between the hours of 9:30a.m.-12:00p.m. Monday-Wednesday and will pick up your child for their appointment, return them to school after all the patients sharing the Brace Bus have completed their blocked time. (Please note: Brace Bus hours are subject to change)
- 4. This service is not available for certain procedures (placement or removal of braces or other appliances, emergencies, appointments longer than 30 minutes, appointments where parents are requested, etc.)
- 5. Please put the Girdwood Orthodontics "Brace Bus" on your school's registration and pick-up list. It is the parents' responsibility to notify their child's school, according to the school's specific protocols on the day of their appointment stating that they will be picked up by the "Brace Bus".
- 6. It is the patient's responsibility to report to the office at the pick-up time. We cannot wait more than 5 minutes for any patient to arrive at the school's office waiting area. Failure to show, or properly notify the school, will result in a cancelled appointment. If the patient is absent from school the day they are to ride the "Brace Bus", please call our office that morning so that the driver will be informed.
- 7. If school is delayed or cancelled due to inclement weather, the service may/will be cancelled for that day. When this occurs, it is always the parent/legal guardian's responsibility to reschedule a new appointment for the patient, or to arrange alternate transportation.
- 8. Patients are required to wear a seat belt while being transported. Patients are asked not to eat or drink while on board the Brace Bus.
- 9. Due to the close proximity of the driver and riders within the Brace Bus, it is not possible for 'social distancing' recommendations to be adhered to. In light of this, parents must accept that airborne diseases may be transmitted between occupants of the Brace Bus. Masks are recommended but not provided.
- 10. Misconduct of a patient while aboard the Brace Bus will result in their suspension from our service. Any damage to the vehicle caused by a patient shall be the monetary responsibility of the parent/legal guardian. Each time the Brace Bus is used, video surveillance is used to document occupant behavior.

11.	Should a patient have two consecutive appointments with a broken appliance, non-compliance with
	elastic wear or an oral hygiene grade of "C" or worse, they will not be allowed to ride the Brace Bus until
	they have an appointment in our office with their parent present to discuss our concerns.

At Girdwood Orthodontics, we are always striving to make your life easier with the best experience possible. In order to make this service operate efficiently and pleasant for our patients, please be aware that these policies and procedures may be subject to change at any time.

Please read, sign/date:

SCHOOL AUTHORIZATION FOR TRANSPORTATION BY GIRDWOOD ORTHODONTICS

TO:	
Name of School	
I, the undersigned,	(print), the parent and/or legal guardian of
authorize and give my permission for my child to Orthodontics. The undersigned understands and school and/or returned by the Girdwood Orthodontics.	I agrees that the above child may be picked up from the ontics' "Brace Bus." The undersigned assumes all ments with Girdwood Orthodontics' office and for
 Girdwood Orthodontics office. Lebanon City Schools does not give any transportation to and from Girdwood Orthodontics 	students are no longer under the custody, care or
This authorization for transportation is valid for	the entire school year beginning August, 20 and
ending June, 20 and dated this	day of, 20
Parent and/or legal guardian (signature/date)	Patient Date of Birth
Parent Cell / Home number	Patient Grade
Parent Work/Emergency number	Patient Gender (male/female)

AUTHORIZATION FOR TRANSPORTATON AND RELEASE OF LIABILITY TO BE SIGNED BY BOTH PARENTS

We, the under signed,	, individually and as parents and/or legal guardians of				
	, hereby allow,	authorize and consent for	r my child to ride the "l	BRACE BUS"	
provided by Girdwood O	erthodontics, D.D.S. The u	indersigned agrees that the	ne "BRACE BUS" may	y pick up my child	
from school for an appoin	tment with Girdwood Ortl	hodontics and returned to	o school following the	appointment. The	
undersigned consent for n	ny child to be taken out of s	chool by the person driving	ing the "BRACE BUS"	" for the purpose of an	
appointment with Girdwo	ood Orthodontics and agre	es to execute and sign a	consent authorizing the	school to release my	
child to the "BRACE BU	S". The undersigned agrees	s and understands that my	y child shall be picked	up and/or delivered at	
school only at the designa	ted times of operation by th	ne "BRACE BUS". My o	child does not have the	authority to change the	
time and/or date of any or	thodontic appointment. Su	ch appointment can only	be changed by the und	ersigned. The	
undersigned agrees that G	Sirdwood Orthodontics or	the operator of the "BRA	ACE BUS" shall have t	he sole and exclusive	
right to make the decision	whether my child shall be	permitted to ride the "BI	RACE BUS". Any mis	behavior or	
misconduct on the part of	my child results in my child	d not being permitted to	ride the "BRACE BUS)"·	
The undersigned understa	nd that the "BRACE BUS"	' is a free service provide	ed by Girdwood Ortho	dontics Dr. Barton J	
Girdwood D.D.S. The un	ndersigned releases and disc	charges Girdwood Orth	odontics and Dr. Bar	ton J. Girdwood	
D.D.S. , and their employed	ees, agents, representatives,	drivers, heirs, and assign	s from any and all claim	ms, causes of action,	
suits, or injuries arising or	at of any way connected with	th my child riding the 'B	RACE BUS'. The unc	lersigned agrees to	
indemnify and hold Gird	wood Orthodontics and D	r. Barton J. Girdwood	D.D.S. harmless of all s	such claims, causes of	
actions, suits, or injuries i	ncluding all costs of litigation	on.			
I hereby agree to the ter	ms stated on this form. Th	his request for transpor	tation is valid for the	entire school year	
beginning August, 20	and ending June, 20	_ and dated this	day of	, 20	
Signature of both Paren	ts and/or legal guardians				
Printed of both Parents	and/or legal guardians	Child's name	Child's name (please print)		
Parent Cell/Home numb	er	Work /Emerg	ency number		