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, author | rize and consent for | my child to ride the "B | RACE BUS' | , |
| provided by Girdwood Ortho | odontics The undersigned ag | rees that the "BRA | CE BUS" may pick up | my child from | n school |
| for an appointment with Gird | wood Orthodontics and retu | rned to school follo | wing the appointment. | The undersign | ned |
| consent for my child to be tak | en out of school by the perso | n driving the "BRA | CE BUS" for the purp | ose of an appo | ointment |
| with Girdwood Orthodontic | s and agrees to execute and s | ign a consent author | rizing the school to rele | ase my child | to the |
| "BRACE BUS". The undersi | gned agrees and understands | that my child shall | be picked up and/or del | ivered at scho | ool only |
| at the designated times of ope | ration by the "BRACE BUS" | '. My child does no | t have the authority to o | hange the tim | ie and/or |
| date of any orthodontic appoi | ntment. Such appointment ca | in only be changed | by the undersigned. The | e undersigned | agrees |
| that Girdwood Orthodontics | or the operator of the "BRA | CE BUS" shall hav | e the sole and exclusive | e right to mak | e the |
| decision whether my child sha | all be permitted to ride the "P | BRACE BUS". Any | misbehavior or misco | nduct on the p | part of |
| my child results in my child n | ot being permitted to ride the | "BRACE BUS". | | | |
| The undersigned understand t | | • | • | • | |
| Girdwood D.D.S.). The under | · | | | | |
| D.D.S. , and their employees, | | | • | | |
| suits, or injuries arising out of | | • | | | |
| indemnify and hold Girdwoo | | ton J. Girdwood L | D.D.S. harmless of all su | ach claims, ca | uses of |
| actions, suits, or injuries inclu | | _ | | | |
| I hereby agree to the terms | | _ | | _ | |
| beginning August, 20 a | nd ending June, 20 and | dated this | day of | , 20 | _ : |
| | | | | | |
| Signature of both Parents and | nd/or legal guardians | | | | _ |
| Printed of both Parents and/or legal guardians | | Child's name (please print) | | | |
| Parent Cell/Home number | | Work /Emergency number | | | |