

Form 560-2

WAIVER AND RELEASE ALTERNATE LOCATION INFORMATION FOR PICK UP AND DROP OFF BY REFERENCE TO THE NAME OF THE LANDOWNER

Information for Drop Off Location Land Owner:	
Municipal Address of DROP OFF L	ocation (including Postal Code)
Legal Land Description of DROP C	OFF Location (if no Municipal Address)
Rural address of DROP OFF Locar	tion (Blue Sign)
Name (Please Print)	Home Phone / Work Phone
Information of Parent(s) as Note	d on <u>Form 560-1</u> :
Parent Name (1) please print	Parent Name (2) please print
Address Parent (1)	Address Parent (2)
Phone Number Parent (1)	Phone Number Parent (2)
Blue Sign	Bus Route
Student Name(s)	

Alternate Location Information