



## Dismissal Policy Waiver Agreement Form

### Middle & High School Students & Siblings

September 2020

Dear Parents,

In the interest of health and safety if students are being collected from the Waiting Room then you are respectfully required to sign a Waiver Agreement agreeing that you are happy for your child/children, as named below, to be collected from the school Waiting Room.

Thank you for your continued support.

RAKAAG ADMINISTRATION

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We {insert parents full name/s \_\_\_\_\_} agree to have our child/children {insert name/s and grade/s} \_\_\_\_\_ to be collected from the school Waiting Room at the end of the school day.

In signing this Waiver Form we understand that we take responsibility as to the identity of the person/persons collecting our child/children and taking them home. Accordingly we indemnify the school of any liability or responsibility.

Signature of parent/s : \_\_\_\_\_

Date: \_\_\_\_\_

Homeroom Teacher \_\_\_\_\_

Date: \_\_\_\_\_

QAM Signature: