## Garrison Mill Elementary Safe Walker Protocol

Student's Last Name	Student's First Name		Date of Birth
Homeroom Teacher	Grade		
Address			
Enrolling Adult Name	Relationship	Cell Phone Number	Home Number
Adults other than Parent/ Guardian (Photo ID may be required)	who are authorized to receive	e my child as a walker or may be	contacted in case of an emer
Authorized Adult (Pleas	se Print)	Cell Number	Home Number
Authorized Adult (Please Print)		Cell Number	Home Number
Authorized Adult (Please Print)		Cell Number	Home Number
I authorize my 8 year old or you Names of sibling(s):	inger child to walk home with	his/her older sibling(s) where ap	opropriate supervision is prov
Students 8 years old and younger w	vill be identified using the yel	low tag/ yellow tag with back d	ot system.
I give permission for my child w	rho is 9 years or older to walk	home without an adult.	
if there are any changes to the inform	mation listed above, please co	omplete a new updated form. Yo	ou will be able to get one in t
ii there are any changes to the infor			

Date