

## Travelwise School

## **Walking School Bus Consent Form**

I wish my child/children to use the Walking School Bus (WSB).

Please print	clearly:					
Children's na	ame(s):					
Birthday(s): _						
			Work ph:			
Mobile:		E-mail:	E-mail:			
The WSB will be used on these mornings (please tick)						
☐ Monday	□ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday		
On these af	t <b>ernoons</b> (plea	se tick)				
☐ Monday	☐ Tuesday	☐ Wednesday	☐ Thursday	☐ Friday		
My child/child	dren will join at	(location):				





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The WSB needs adults like you to volunteer time for different activities occasionally. Your contact details will be passed on to our WSB coordinator who will be in touch with you soon to welcome you aboard. Please indicate what your family may be able to assist us with:

□ Driving a bus one morning/afternoon a week			
☐ Assisting with WSB gatherings			
□ Designing informative flyers for WSB activities			
☐ Sending out WSB birthday cards or new member packs			
☐ Other areas you can help (please specify)			

- I realise that my child's journey to and from school is still my responsibility even though they will be using the WSB.
- I have read the WSB Road Safety Guidelines and explained to my child the need for good behaviour.
- I have explained the WSB Pledge to my child and we have both signed it.
- If my child/children make their own way to/from the bus stop I understand they are still my responsibility during this time.

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