

**STUDENT WALK-HOME/RIDE BIKE PERMISSION SLIP
AND INDEMNITY AGREEMENT**

CHILD: _____ **Grade:** _____

PARISH/SCHOOL: The Charleston Catholic School

HOME ADDRESS :

DESTINATION:

****DISMISSAL PERIOD: Please check one box for each day, and list the program if applicable.**

	Regular Dismissal	After Care Program
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

My signature below represents my consent, allowing my CHILD/WARD to walk home or ride a bike home after school, following a regularly scheduled school day directly after dismissal or following a scheduled after school program(s). In consideration for my CHILD/WARD's ability to walk home/ride bike, I agree to reimburse and indemnify the The Charleston Catholic School (understood to include Bishop of Charleston, A Corporation Sole) for all reasonable legal and court fees incurred by the The Charleston Catholic School in defending a lawsuit that I or my CHILD/WARD may bring against the The Charleston Catholic School which relates to my CHILD/WARD walking home/riding bike after school.

I certify that I have an understanding of this agreement and any risks and hazards associated with walking home/riding bike from the aforementioned The Charleston Catholic School. Risks and hazards, for purposes of this agreement, are defined as including but not limited to, inclement weather, construction, and automobile traffic in the vicinity of the CHILD/WARD at any moment as they walk to their final destination. In the event that I wish to pick up my CHILD/WARD after the regularly scheduled school day or scheduled after school program instead of allowing them to walk home, I understand that it is my duty and responsibility to notify the PARISH/SCHOOL Office of that alteration or any future adjustments. I further understand that I had the opportunity to fully discuss this agreement with a representative of The Charleston Catholic School to clarify any concerns or questions about walking home or this agreement that I may have had.

Parent/Legal/Guardian: _____ Signature & Date: _____

Parent phone and Child's cell (if applicable):

Emergency Contact & Phone:

Please note any additional addresses you have designated and approved for your child to walk to other than the home address on file at the school: This form should be completed and on record with the school office for any child who intends to walk home. Students may walk home or to the designated places mentioned above, only when a permission slip is signed, dated by a parent or guardian, and is on file at the school. If the school does not have this slip,, your child will not be released without authorization of a permitted adult. **This permission slip is valid for 2025-2026.**