On , 2023, I, the parent/guardian of:

 *(Please print the student’s name)*

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

received a copy of the COVID-19 school vehicle procedures for the 2023-2024 school year, and I have reviewed them with my student(s).

*(Please have each student write their name in the spaces below)*

I, agree to follow the COVID-19 School Vehicle Procedures.

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