



2022/23 Transportation Consent Form

Child's Name _____ Parent Name _____

Email _____ Cell Phone _____

Emergency Notification

Name _____ Phone _____ Relationship _____

_____ My child is enrolled in the morning program at Rye Reads Learning Center. I hereby give my permission for my child to travel from Rye Reads Learning Center to _____ECC _____RPNS _____CCNS

_____ My child is enrolled in the afternoon program at Rye Reads Learning Center. I hereby give my permission for my child to be picked up and travel from the school checked below to Rye Reads Learning Center _____ECC _____RPNS _____CCNS

ECC/Early Childhood Center Community Synagogue of Rye
RPNS/Rye Presbyterian Nursery School CCNS/Christ Church Nursery School

It is understood and agreed that your child will be transported by a Third-Party Transportation Company contracted by Rye Reads for your child's transportation. In granting permission, you hereby expressly waive any claim for liability against Rye Reads Learning Centers, including its employees and representatives and release them from liability in connection with this transportation. Further, in case of emergency or injury to your child, you hereby authorize the school to act in the best interest of your child. It is further warranted that if this Trip Permission Form is signed by one of two parent/guardian, it is with the authority of the other. You will be responsible to inform your child's school of this permission and consent. This liability waiver and release extends to all owners, partners, and employees of Rye Reads Learning Centers.

	Circle days for transportation. <i>Must be the same as days you are attending Rye Reads.</i>	Monthly Fees
5 days	M T W TH F	\$400.00
4 days	M T W TH F	\$320.00
3 days	M T W TH F	\$240.00
2 days	M T W TH F	\$160.00

Transportation Fee Policies

Transportation for the 2022/23 school year (Sept. – June) is confirmed upon receipt of this signed consent form. No pro-rate or refunds for missed days. Transportation invoices will automatically be sent on the 15th of each month. Payment is due by the 30th of the month. A 30-day written cancellation notice is required.

PARENT SIGNATURE _____ DATE _____