



**Early Release/Late Arrival
BUFFALO PUBLIC SCHOOLS
Parental/Guardian Consent
SUMMER SCHOOL 2024**

Summer school programming will operate **from 7/15 – 8/9, 2024 for Middle School and 7/16 – 8/16, 2024 for High School**. If your child is not scheduled for a full day, you must fill out the consent form below for your child to be released early or to arrive after first period. Your child will receive this form on the first day of summer school.

Consent form for early dismissal or late arrival:

I _____ hereby consent for _____,
Print Parent/Guardian's Name *Print Student Name*

to be discharged from school earlier than the normal class dismissal time. I understand that my son/daughter/ward may be walking, taking public transportation, or traveling by other means upon dismissal from school without the supervision of a teacher or Buffalo City School District employee.

In consideration of the permission granted to my son/daughter/ward by the Buffalo City School District to be discharged from school earlier than the normal class dismissal time, I hereby agree to assume any and all risk and liability for losses or damages to property and for damages, injuries or death to my son/daughter/ward which may arise in connection with travel from a Buffalo City School District school, and hereby, for my son/daughter/ward and for myself and our heirs, executors, Administrators, successors, and assigns do release and discharge the Buffalo City School District and each of its affiliates, Board Members, officers, directors, agents, employees, representatives, assigns and volunteers from any and all claims, actions, suits, demands, damages, losses, judgments, payments, awards, and other liabilities arising from or relating to travel from a Buffalo City School District upon discharge from Summer school earlier than the normal summer school class dismissal time.

I acknowledge that I fully understand and agree that this Consent/Waiver Form shall operate as a complete defense to any claim or entitlement which hereafter may be asserted by me or any other person acting on my behalf, against the Buffalo City School District and each of its affiliates, Board Members, officers, directors, agents, employees, representatives, assigns and volunteers for or on account of any matter or thing whatsoever arising out of or in any way based upon discharge from school earlier than the normal summer school class dismissal time.

By signing below, I acknowledge that I had sufficient time to read this Consent/Waiver Form and the opportunity to consult my respective attorney with respect to the terms set forth herein. I represent that I individually and respectively understand all the content and legal effect of all the terms and conditions of this Consent/Waiver Form, agree to be bound by the terms of this Consent/Waiver Form, and freely and voluntarily execute this Consent/Waiver Form. This Consent/Waiver Form constitutes the entire agreement of the Parties hereto with respect to the subject matter of this Consent/Waiver Form and supersedes any prior understandings or written or oral agreements between the Parties with respect to the subject matter of this Consent/Waiver Form.

Parent/ Legal Guardian Signature

Date