



Request of Transportation

I, the undersigned, _____, parent and/or legal guardian of _____, hereby allow, authorize and consent for my child to ride the "BRACE BUS" provided by D. Douglas Depew, D.M.D., M.S., P.C (d.b.a Depew Orthodontics). The undersigned agrees that the "BRACE BUS" may pick up my child from school for an appointment with Dr. Depew and returned to school following the appointment with Depew Orthodontics.

The undersigned consents for my child to be taken out of school by the person driving the "BRACE BUS" for the purpose of an appointment with Depew Orthodontics and agrees to execute and sign a consent authorizing the school to release my child to the "BRACE BUS". The undersigned agrees and understands that my child shall be picked up and/or delivered at school only at the designated times of operation by the "BRACE BUS". My child does not have the authority to change the time and/or date of any orthodontic appointment. Such appointment can only be changed by the undersigned.

The undersigned agrees that Dr. Depew or the operator of the "BRACE BUS" shall have the sole and exclusive right to make the decision whether my child shall be permitted to ride the "BRACE BUS". Any misbehavior or misconduct on the part of my child could result in my child not being permitted to ride the "BRACE BUS".

The undersigned understands that the "BRACE BUS" is a service provided by D. Douglas Depew, D.M.D., P.C., at no charge. The undersigned hereby releases and forever discharges D. Douglas Depew, D.M.D., M.S., P.C., its employees, agent representatives, drivers, heirs, and assigns from any and all claims, causes of action, suits or injuries arising out of or in any way connected with all children riding the "BRACE BUS".

This request for transportation is valid for the entire school year beginning August 2009 through May 2010.

Child's Name (Please print)

Date

Parent and/or Legal Guardian