

NATRONA COUNTY SCHOOL DISTRICT
970 N. Glenn Road, Casper, WY 82601 - 307-235-5222
Steve Hopkins, Superintendent of Schools

***Consent Allowing Enrollment, Release of Information, Release of Student, and Consent for Person(s)
Other Than Legal Parent/Guardian to Represent Student***

Student Name: _____ **School:** _____ **Grade:** _____

School Year: _____ **(This release is limited to one school year, including Summer School, if applicable).**

Date: _____ **Student's Parent/Legal Guardian (Circle one):** _____

Name, Relationship, Address and Contact Number(s) for Person(s) Authorized to Receive and Exchange Student Information and to Represent Student on Parent/Legal Guardian's Behalf: _____

Representation of students for school and educationally-related purposes, exchange of student information and pick up/drop off of students is generally limited to legal parents and legal guardians caring for the student. Therefore, if a student's parent/legal guardian wishes for another person to attend and participate in educationally-related matters on their behalf, they must complete this form.

As the student's legal guardian/parent, you have asked that someone other than yourself represent you for educationally-related issues concerning your student including, *but not limited to:* parent/school personnel conferences, receipt and exchange of student academic, disciplinary, special education, disability, medical/nursing, counseling/social work, legal and/or other information and notifications. You have asked that this person or persons be allowed to deliver the student to school and pick him/her up from school.

The parent/legal guardian and authorized individual agree to the following:

- The authorized person has my (the legal parent/guardian's) consent to enroll the student in a school within Natrona County School District.
- The authorized person will follow all Natrona County School District (NCS D) rules and policies, including but not limited to student check in/check out procedures.
- S/he will address school personnel with courtesy and respect, following all school personnel requests and instructions. Use of profanity, argument or failure to abide by all school requests is prohibited.
- S/he will respect student confidentiality and limit discussions or sharing of student information to the student's legal parent or guardian.
- This authorization is revocable at NCS D's or the legal parent/guardian at any time, with or without cause. Such revocation shall be effective when dated, placed in writing and received by the other party. Revocation shall not invalidate previous acts by the parent or guardian representative.
- Nothing herein prevents the legal parent or guardian from receiving student school information upon proper request.

Liability Release: As the student's legal parent or guardian, on behalf of myself and my student, I release NCS D from all liability associated with the release and authorization made herein, and I freely and without coercion waive my right to sue or claim against NCS D in any manner for any damage or injury of any type or kind whatsoever which may occur as a result of the authorized person(s) actions or omissions related to my student, regardless of whether such actions or inactions are due to negligence or intentional misconduct. My signature below confirms my waiver and liability release.

I, _____ (Parent/Legal Guardian) authorize _____
to represent me and my student in any and all school-related capacities as noted above.

Legal Parent/Guardian _____ Authorized Person(s) _____

Witness: _____ Date: _____ Title: _____