

# Yoani Springs Academy

## PARENT/GUARDIAN RELEASE LETTER

Learner Details Learner Name:

..... Admission

Number: ..... Class:

..... Parent / Guardian

Details Name: .....

National ID / Passport Number: ..... Phone

Number(s): ..... I hereby

formally authorize the school to release my child under the following condition(s):

Release from the school compound unaccompanied at the end of the school day or approved school activities.

Drop-off by school transport without an accompanying parent/guardian, after which my child will proceed independently.

I understand and acknowledge that: 1. The school has a duty of care to my child only within school hours and within the school compound or while under official school supervision. 2. Once my child is released or dropped off as authorised above, the school's responsibility ceases immediately. 3. I take full responsibility for my child's safety, conduct, and well-being from the

point of release or drop-off. 4. This authorization is given voluntarily and in full awareness of the associated risks. 5. This authorization does not apply during emergencies or where the school reasonably determines that release would place the child at risk. 6. This consent remains valid unless withdrawn in writing by the parent/guardian. Parent / Guardian Name:

..... Signature:

.....Date..... School Stamp /

Official Use: .....