

RCSA Elementary Carpool Contract

I, _____ (parent/guardian name), agree to the following conditions/requirements listed below while my child is participating in carpool at River City Science Academy Elementary.

- 1.) I will visibly display my carpool tag during afternoon pick up. If I do not have my carpool tag, I will go into the front office and show my ID, and then (a) purchase another carpool tag or (b) wait until the carpool is complete and my child will be sent to the front office for pick-up.
- 2.) When entering the carpool loop, I will pull down as far as possible to the cones or staff members directing traffic, optimizing the number of students that are able to load/unload.
- 3.) I will not pull out of the carpool line and around other cars unless directed to do so by a staff member.
- 4.) I will remain in my car at all times so as not to impede the flow of traffic.
- 5.) When dropping off, my students will be prepared to exit the car in a timely fashion. If my student is not ready to exit the car, I will be directed to park in an allotted space.
- 6.) I will observe a safe and appropriate speed limit in the carpool loop.
- 7.) I will be courteous and respectful to the staff members directing carpool and safety patrols assisting students.
- 8.) If I am a walker, I understand that I must wait until the carpool is complete before my child will be released.
- 9.) If I am late to picking up my child (after 3:00 pm), I will pick them up through Car Loop 1, where they will be checked out of Extended Day, and I will pay the daily rate of \$15 through School Pay.

If someone else will be picking up my child, I will provide them with carpool tags, or the individual will be required to show ID in the front office to receive a temporary tag (good for that date only).

Failure to comply with any of the above requirements may result in your carpool privileges being revoked. I have read the carpool procedures and will adhere to the conditions and requirements in order to keep the students, faculty and staff safe at River City Science Academy Elementary.

Student Name (Print only): _____

Parent(s) Name (Print only): _____

Signature: _____ Date: _____

*If you would like to join RCSA's carpool team, please email jhough@rivercityscience.org. The only requirement for you to join this team is that you complete the Duval County Volunteer Application at <https://dcps.duvalschools.org/volunteers> and, of course, be cleared.