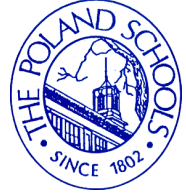




Poland Seminary High School Athletic Department

Brian Banfield, Assistant Principal - Athletic Administrator
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ATHLETIC EVENT/GAME TRANSPORTATION RELEASE FORM

It is the responsibility of our school district to provide transportation for student athletes to and from scheduled athletic events. In special cases, it may be necessary for an athlete to travel with his/her parents or the parents of another player. **Under no circumstances may an athlete be permitted to drive his/her own vehicle.** Parental transportation is only permitted if a parent has submitted a direct request to the Head Coach and completes this transportation release form. This form must be approved by the Head Coach and filed with the Head Coach. If you are requesting this alternative, please complete the following form.

Thank you for your assistance in helping provide safe and secure travel of our athletes.

Athlete's Name _____

Sport _____

Date(s) of Event _____

Please check the appropriate response:

____ I am requesting permission to transport my child to and/or pick up my child from the above scheduled athletic event(s). I assume complete legal responsibility for my child and guarantee that he/she will arrive promptly at the scheduled athletic event.

____ I am requesting permission for my child to be transported to and/or picked up from the above scheduled athletic event(s) by _____ (Parent of another player on the team). By signing below _____ (Parent of another player on the team) assumes complete legal responsibility for my child while providing such transportation and guarantees that he/she will arrive promptly at the athletic event. *Please note that this parent must sign below to verify that he/she agrees to transport the student and assume responsibility for the student.*

This form must be properly signed and returned to the Head Coach at least 24 hours before the event.

Student's Signature _____

Parent's Signature _____

Parent's Name (Print) _____

Transporting Parent of Other Player's Signature (if applicable) _____

Transporting Parent's Name (Print) (if applicable) _____

Reason for transportation: _____

____ Approved _____ Not Approved _____ Date _____

Head Coach