ALTERNATE TRANSPORTATION REQUEST FORM

STUDENT / STUDENT ATHLETE

MANHASSET UFSD

I understand that the Manhasset UFSD rules require that students ride the bus to and from all school events and that by requesting a departure from this requirement, I will release the Manhasset Board of Education and the Manhasset UFSD from all liability for any accidents that may occur. I understand that I (or the other parent or guardian driving the vehicle) assumes all liability for this alternative transportation under our personal automobile insurance policy.

I therefore agree to release the Manhasset Board of Education and the Manhasset UFSD and its employees and officers from all liability.

_____ _____
Student's Name - Please Print Date

_____ _____
Parent/Guardian - Please Print Parent/Guardian - Signature

_____ _____
Classroom Teacher - Please Print Sport and Coach- Please Print

DATE	TO/FROM (circle one)	LOCATION	FULL NAME OF DRIVER	RELATIONSHIP	DRIVER'S SIGNATURE
	TO/FROM				
	TO/FROM				
	TO/FROM				
	TO/FROM				
	TO/FROM				
	TO/FROM				