

East Islip School District  
Office of Instruction and Personnel

**ALTERNATIVE RETURN TRANSPORTATION FORM**

I, \_\_\_\_\_ the Parent or Guardian of \_\_\_\_\_ (student) hereby grant permission to \_\_\_\_\_ (name of adult transporting student) to provide appropriate transportation for my child from \_\_\_\_\_, a school sponsored activity. I understand the East Islip Union Free School District ("District") has offered and provided appropriate District transportation for my child's return from this school sponsored activity, however, I acknowledge that I am waiving my child's right to access District transportation and I am authorizing an alternative form of transportation.

In consideration for allowing said alternative form of transportation for my child, I hereby release the District, the Board of Education of the East Islip Union Free School District ("Board"), its members, individually and in their official capacities, the Superintendent of Schools, individually and in her official capacity, or any of the District's employees, agents or independent contractors, from any liability, claim, suit, or expense including, but not limited to negligence, for any injury or harm which may result from the alternative transportation of my child from \_\_\_\_\_ to \_\_\_\_\_.

Neither I nor anyone acting on my behalf will make a claim against the District, the Board, individually and in their official capacities, the Superintendent of Schools, individually and in her official capacity, or any of the District's employees, agents or independent contractors, as a result of any loss, injury, or damage suffered by me (or my child) as a result of the alternative transportation provided to my child. This release includes any losses caused or alleged to be caused, in whole or in part, by the negligence of the District and/or its employee, agents or independent contractors to the fullest extent allowed by law.

I have carefully read, understand and voluntarily sign this document.

\_\_\_\_\_  
Parent(s)/Guardian(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Individual Providing  
Alternative Transportation to Child

\_\_\_\_\_  
Date