

Engage, Educate and Empower Every Student, Every Day

Scottsdale Unified School District Athletic Department Alternate Transportation Consent Form (Completion of this form required at the beginning of each Sport season)

Student Athlete (Please	Print)	I.D. #
Sport/Season (Year)		Coach
This form must be com to any alternate transp		e beginning of each sport season of the school year prior
with his/her parent(s) of Permission form for that ***Note: No fellow stucircumstances.	r the alternative parent t event and submitted p dents or teachers will be	e approved as parent designee(s) under any
My son/daughter has p	ermission to travel with	n any of the following individuals (please print):
1.	Name	Phone
2		
	Name	Phone
transport my child from responsible and SUSD that occurs as of the transurance and shall not after the time my child a valid driver's license	om the destination. I un is not responsible for time my child is signed of be held liable for an d is signed out from the	I or my designee above may have permission to nderstand that I or my designees are solely supervision and shall not be held liable for anything out. Specifically, SUSD shall not be responsible for y damages or injuries of any kind that occur at or ne activity. I agree that proper identification (such as he appropriate SUSD personnel, before the sign my child out.
Signature of Parent:		Print Parent Name:
Date:	Home Phone:	Cell Phone: