



*Every Student, Every Day, A Success!*

## REQUEST FOR ALTERNATE TRANSPORTATION

I do hereby consent to my son and/or daughter not traveling to/from the activity listed below on school provided transportation. I do hereby release Hall County School District #2 from any obligation to transport my son and/or daughter to/from said activity. I agree that if this request is granted, the school and school officials will have no liability or responsibility for injury or damage that may occur when my child is released from school provided transportation.

Name of Student: \_\_\_\_\_

Sport/Activity/Class: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Person student will be released to: \_\_\_\_\_

I request that my child (named above) not be required to ride on the team/class bus/van:

- To the event
- On return from the event
- Both to and on return from the event

The reason(s) for my request is/are: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Guardian

The request is: \_\_\_\_\_ approved \_\_\_\_\_ denied

Date: \_\_\_\_\_

Signature of Activities Director or Principal

This form should be given to the Activities Director or Principal NO LATER THAN 2 DAYS before the event whenever possible.

### In Person Event Release:

Printed Name of Person Child is released to

\_\_\_\_\_ Date \_\_\_\_\_

\*Signature of Parental Directed Adult student is released to \_\_\_\_\_