BRONXVILLE UNION FREE SCHOOL DISTRICT
TRANSPORTATION RELEASE FORM

It is expected that students will travel to and from athletic competitions or activities with their teams or groups, but in certain circumstances the student, parents or designated third parties may drive them and/or pick them up. This form must be properly completed, signed and returned to the coach or supervising employee prior to or (if only providing transportation from the activity) at the extracurricular activity in order to obtain the release of the child from the transportation provided to and/or from the site by the District. A new form must be completed each time the release of a child is sought from the District transportation obligations.

GOING TO AN ACTIVITY OR ATHLETIC EVENT

I, _____request that the District release my child,
Name of Parent/Legal Guardian

_____, into my custody/the custody of a third party or
Name of Student *(choose only one option)*

To drive theirself to the extracurricular activity listed below. My child does not need transportation to the event from the District. The applicable information is as follows:

Extracurricular Activity _____
Identify Athletic Competition, Sport or Event

_____
Location of the Activity

_____
Date of Activity

Third Party Information
(If applicable)

_____
Name

_____
Relationship to Child

_____
3rd Party Address

_____
Telephone & Cell Numbers

PICKING UP AT THE END OF AN ACTIVITY OR ATHLETIC EVENT

I, _____ request that the District release my child,
Name of Parent/Legal Guardian

_____, into my custody/the custody of a third party at
Name of Student *(choose only one option)*

the conclusion of the extracurricular activity listed below. My child does not need return transportation from the District. The applicable information is as follows:

Extracurricular Activity

_____
Identify Athletic Competition, Sport or Event

_____
Location of the Activity

_____
Date of Activity

Third Party Information
(If applicable)

_____
Name

_____
Relationship to Child

_____
3rd Party Address

_____
Telephone & Cell Numbers

I assume full responsibility for my child's transportation to the extracurricular activity or athletic event and/or for picking up my child from the extracurricular activity or athletic event, by me or the designated third party. I understand that under no circumstances may my child be driven to, or picked up from, the above event or activity by any individual other than the person named on this form. I understand that I, or the designated third party, must present my child to the activity advisor or coach upon arrival, or when picking up my child, meet directly with the activity advisor or coach. I understand that if I, or the designated third party, do not pick up my child when the bus is ready to depart, my child will return on the bus to the designated District site.

_____ _____
Signature of Parent/Legal Guardian Print Name of Parent/Legal Guardian

_____
Date

FOR DISTRICT USE ONLY:

_____ _____
Approved by Date