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HILLSDALE PK-6
419-368-4364
HILLSDALE 7-12
419-368-6841
CENTRAL OFFICE
419-368-8231

Hillsdale Local School District Travel Permit, Liability Release, and Risk Acknowledgement Statement

Alternate Travel Request Form

I understand that Hillsdale High School rules require students to ride the buses to and from all school events and that by requesting a departure from this requirement I will release the Hillsdale Local School Board of Education for any accidents that may occur. I understand that I (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 Hillsdale Local School Board of Education and its employees from all liability.

*If Alternative Transportation is requested to drive my child **TO** an Athletic Contest, this form will be turned in at least 1 day prior to the event.

Name of Athlete _____

Sport _____

Coach _____ Date _____

To Specified School _____

From Specified School _____

Name of Driver & Relationship _____

Signature _____