Southgate School District
Parent/Guardian Transportation Authorization

Student Athlete Name:_____

Parent/Guardian Name:_____

Sport: _____ Level: _____

Head Coach: _____

My son/daughter has my permission to travel in a private vehicle driven by:

_____ from _____ on _____.
(Name of Parent/Guardian or adult driver) (Site of Competition) (Date)

I understand the following:

- ☐ Student athletes must ride the bus to the contest if a bus is provided.
- ☐ Student athletes may ride home with a parent, guardian or the designated ADULT driver listed.
- ☐ When buses are scheduled for a contest, students **MAY NOT** drive themselves to or from that contest

➢ **This form must be signed by parent/guardian and athletic director and received by the coach prior to the departure of the team.**

I understand that the Southgate Anderson Athletic Rules require that students ride the buses to and from all athletic events and a departure from this requirement will release the Southgate Community School District from all liability for any adverse results that may occur. I agree to release the Southgate Community School District and its employees and officers from liability with reference to the above stated transportation. This form must be on file in the athletic director office prior to dismissal of school on the day before the contest

I will not hold Southgate Community Schools or any school personnel liable for accident or injury on the trip.

Parent or Guardian Signature_____ Date_____

AD or Administrator Signature_____ Date_____

This form must be turned in to the Coach prior to the game. The signed form may also be emailed to the athletic office at buchananb@sgate.k12.mi.us The athletic director or administrator will not sign the form unless it has already been signed by the parent.