

AMITY REGIONAL SCHOOL DISTRICT #5
ALTERNATIVE ADULT TRAVEL RELEASE FOR STUDENT-ATHLETE

This is a request that _____ a member of the
(Athletes Name)

_____ at _____
(Team) (School)

be given permission to be transported by an alternative method of transportation other than the Amity Regional School District #5's transportation on _____ To: _____
(Date)

or From: _____. I myself cannot provide this transportation and request permission be granted to _____ to transport to/from the above destination.
(Alternative Adult)

The reason my child cannot be transported by Amity Athletics is _____

The reason I cannot personally transport my child is _____

I understand that Amity Regional School District policy indicates that student-athletes are to travel via the provided transportation. By requesting a waiver I agree to identify and hold the Amity Regional School District, its officers, agents and employees harmless from any and all claims or loss for bodily injury or property damage arising out of such independent travel.

It is understood that _____ will **personally** transport my son/daughter and
(Alternative Adult)
assume **full responsibility** for his/her **health and safety**.

Parent/Guardian's Signature Date Cell phone #

Alternative Adult Signature Date Cell phone #

Coaches Signature Date

Director of Athletics' Signature Date

THIS FORM MUST BE SUBMITTED TO THE COACH NO LATER THAN 48 HOURS OF THE EVENT- THE ATHLETIC DIRECTOR WILL HAVE FINAL APPROVAL