

Department Athletic and Student Activities Transportation Permission Form

--- This document is to be completed each time alternate transportation is being requested ---

ALTERNATE TRANSPORTATION PERMISSION FORM

In lieu of the transportation provided by the Morris County USD 417, I give permission for my child to travel home with the parents/guardians listed below. I understand that in the event of an accident, Morris County USD 417 is not liable for personal injury. It is understood that the driver assumes all expenses related to transportation from a school sponsored activity.

| My Child's Name | | | |
|--|-------------------------------|------------------------|-------|
| Event | | | |
| Please check the box: ☐ I give permission for my so | on/daughter to ride home with | Name of parent driving | |
| Parent Signature: | | | Date: |
| Parent Driving Signature | : | | Date: |
| Coach/Advisor/A.D. Sign | ature: | | Date: |

This signed permission slip must be presented to the school office by the morning of the event.

