

Rye City School District
Department of Health, Physical Education, and Athletics

SEASONAL TRANSPORTATION RELEASE

Today's Date _____

Coach _____

This is to certify that _____ has my permission to use alternate
(Student name)
transportation to/from _____ athletic games/practices.
(Sport)

I certify that: (check all that apply)

1. I am personally transporting the above named student.
2. Student may ride from athletic practices/games in a car pool with designated parents or legal guardians.

List **first name and last name** of parents or legal guardians who may transport your athlete:

_____	_____
First Name and Last Name	
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Time period of request from: _____ to _____
(Month/Day/Year) (Month/Day/Year)

The reason for not riding the school district provided transportation is _____
_____.

I understand that Guidelines of the Rye City School District and Rye High School require that students ride the provided transportation to and from all athletic games/practices when transportation is provided. A departure from this requirement will release the Rye City School District and its employees from any and all liability for any adverse results that may occur.

This form must be completed and returned to the High School Athletic Office no later than 12:00 pm on the day the student will not use the provided transportation. Phone call or email approval will not be granted.

(Parent/Guardian Signature) (Date) (Athletic Director Signature) (Date)