

**TRANSPORTATION RELEASE FORM**

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**This form must be properly completed, signed and returned to the District supervising employee prior to or at the extracurricular activity in order to obtain the release of a child from the transportation provided back from the site by the District. A new form must be completed each time the release of a child is sought from the return transportation provided by the District.**

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I, \_\_\_\_\_, request that the District release my child,  
(Name of Parent/Legal Guardian)

\_\_\_\_\_, into (my custody / the custody of a third party) at  
(Name of Student)

the conclusion of the extracurricular activity listed below. My child does not need return transportation from the District. The applicable information is as follows:

Extracurricular Activity:

\_\_\_\_\_  
(Identify Athletic Competition, Field Trip or Other Event)

\_\_\_\_\_  
(Location of Activity)

\_\_\_\_\_  
(Date of Activity)

Third Party Information:\*

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Relationship to Child)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Telephone Number)

**\*All third party releases will require a photo ID**

I assume full responsibility for bringing my child home or authorizing his or her transportation back from the site of the extracurricular activity with the above third party. I understand that under no circumstances will the District release my child to anyone other than the person named on this form.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Print Name of Parent/Legal Guardian

\_\_\_\_\_  
Date