

**COCURRICULAR AND EXTRA CURRICULAR PROGRAMS  
(ALTERNATE TRANSPORTATION REQUEST)**

The name of the person who will provide the alternate transportation, the problem causing the alternate transportation and parent signatures must be on this request.

For a student to be transported to or to and from an activity using alternate transportation, (1) parents/guardians must complete this request form and have it approved by the building administrator prior to the activity; (2) parents/guardians must provide the alternative transportation personally if the request is being made due to an issue with a bus driver.

Request for Alternate Transportation:

Student Name: \_\_\_\_\_ Activity: \_\_\_\_\_

Date and Time student will be picked up: \_\_\_\_\_

Reason for the request: \_\_\_\_\_

\_\_\_\_\_

For a student to be transported from an activity using alternate transportation, (1) parents/guardians must complete this request form and have it approved by the building administrator prior to the activity if the transportation will be provided by a person other than the parents/guardians; (2) if the transportation will be provided by the parents/guardians they must submit a written request to the sponsor of the activity and personally pick up their child.

Release of Claims: To the maximum extent permitted by law, in consideration of the approval of the foregoing request, the undersigned parent/guardian, on behalf of the above-named student, myself, the student's and my heirs, personal representatives, successors and assigns, does hereby release and discharge Sheridan County School District One, its trustees, administrators, employees, representatives, agents, successors and assigns (hereinafter referred to as "Releasees") from any and all claims, hereunder, whether arising out of negligence, strict or absolute liability, intentional acts, or by operation of law. I certify and warrant that I have the authority to sign on behalf of such minor student or ward and agree to indemnify the above-named Releasees for any claim made by the minor student or ward or any person on his or her behalf.

\_\_\_\_\_  
Alternate Transportation's Name      Date      Parent's Signature

The foregoing request is hereby approved/disapproved.

By/Title: \_\_\_\_\_ Date: \_\_\_\_\_