

Benilde-St. Margaret's

ATHLETIC/ACTIVITIES ALTERNATE TRANSPORTATION REQUEST

_____ has my permission to ride home with
(Name of Student)

(Name of Adult)

This request is for:

(List specific event(s) and date(s))

I will assume all responsibility and will not hold Benilde-St. Margaret's School liable for any accident or injury that may incur while transporting my son/daughter from this activity.

Signature of Parent/Guardian

Date

Students and the parent/guardian who is driving must receive VISUAL and VERBAL recognition from the coach before leaving event.

Students cannot drive their own cars if a bus is provided and students cannot drive other students to an event.

Please turn completed forms into COACH(es).