



**Howland Local School District  
Activities Department  
Request for Transportation Release**

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It is the responsibility of our school district to provide transportation to and from scheduled events. In special cases, it may be necessary for the student to travel with their parent(s)/legal guardian(s). This may be done only if a parent/guardian has submitted a direct request to the Advisor. This form then must be submitted to the Advisor *at least three days* before the event. Under no circumstances may a student be permitted to drive his/her own vehicle. If you are requesting this transportation alternative, please complete the following form. Thank you for your assistance in helping provide the safe and secure travel of our students.

Student Name: \_\_\_\_\_ Sport: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Home Address: \_\_\_\_\_

Head Coach: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Event Name/Location: \_\_\_\_\_ Date of Conflict: \_\_\_\_\_

**Transportation release request (please check the appropriate response):**

\_\_\_\_\_ To contest                      \_\_\_\_\_ From contest                      \_\_\_\_\_ Both to and from contest

**Reason:**

\_\_\_\_\_ SCHOOL EVENT

\_\_\_\_\_ IF OTHER, PLEASE EXPLAIN : \_\_\_\_\_

**WAIVER:** In consideration of the acceptance of this request for transportation release, we understand that we are acting against the recommendation of the Howland Board of Education, Howland Activities Department, and the staff. We understand that this request must be given TO THE ADVISOR AT LEAST 3 DAYS PRIOR TO THE CONFLICT DATE, AND THAT I, THE STUDENT WILL ONLY BE RELEASED TO US, THE PARENTS/LEGAL GUARDIANS. We do hereby, for ourselves, our heirs, executors, and administrators, waive and release and discharge the Howland Board of Education, Howland Activities Department, the staff, and any additional hosts or sponsors, or their respective agents, representatives, and employees from all claims, demands, and rights of causes of action, present and future, whether known or anticipated, resulting from or arising out of, either directly or indirectly, our decision to not use school provided transportation.

Signature of the student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent/legal guardian: \_\_\_\_\_ Date: \_\_\_\_\_

<b><u>FOR OFFICE USE ONLY:</u></b>	Date form received by Advisor: _____
Signature of ADVISOR: _____	Date: _____
Signature of AD: _____	Date: _____
_____ APPROVED	_____ DENIED