## Attachment A

Verification Form for taking your own child home from an away event.

DATE		

Name of	Name of	Signature of	
Participants	Parent/Guardian/ Designated Adult	Parent/Guardian/ Designated Adult To take their own child home	Participant returned by School Bus Transportation

## **Attachment B**

## WAIVE RIGHTS TO TRANSPORTATION PROVIDED BY SCHOOL DISTRICT FOR CO-CURRICULAR/EXTRA CURRICULAR/ATHLETIC EVENTS.

As described in Policy #5130.2, I	have chosen
Pare	ent/Guardian
to waive my rights to utilize the transportation	n provided by the School District for transporting
my child $\mathbf{TO}$ and $\mathbf{FROM}$ all events during the	
current season for	I understand that signing
Event	
this form means my child, under no circumsta	ances, will be allowed to utilize school
transportation to get to or from any away eve	ents for the entire season of this activity.
I as the Parent/Guardian of	take full
	Student (s)
responsibility for the transportation of this/the	ese child(ren) To and From all events during the
season of the above mentioned activity.	
Cian at use of Donast/Cuandian	
Signature of Parent/Guardian  Date	