

Regional School District #17

## **Parent Request to Transport**

**STUDENT NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Event: \_\_\_\_\_

Date of the event: \_\_\_\_\_

Time of event: \_\_\_\_\_

Reason for parent transport:

I understand that I may only transport my own child(ren) and that I am accepting full responsibility and liability for the above transportation.

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

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