**Jacksonville Middle School - District #117**

664 South Lincoln Ave.

Jacksonville, Illinois 62650

Office: (217) 243-3383

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Celeste Lashmett, Principal

Anthony Mansur, Asst. Principal

Samantha Bushnell, Asst. Principal

**Alternate Transportation Agreement- \*MUST BE COMPLETED\***

Student Athlete Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Level: \_\_\_\_\_\_\_\_\_\_\_

Coach’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sporting Event Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sporting Event Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Direction of Alternate Transportation:

\_\_\_\_\_\_\_\_\_\_ “To” the Sporting Event

\_\_\_\_\_\_\_\_\_\_ “From” the Sporting Event

Reason for requesting Alternate Transportation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Only complete this section if giving permission for another party to transport the student athlete- To be completed by the parent/guardian minimum 24 hours prior to the trip.**

I authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to take my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to or home from the school trip.

Parent/Guardian’s Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of adult who will be taking the child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Specify person and relationship (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*MUST BE COMPLETED\***

My Student athlete, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, will not be utilizing school transportation as outlined above. I release the district, school and school personnel from all obligations and liability for my child on the date of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Parent Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrative Approval (REQUIRED): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Transportation**

The district provides transportation to all away events/games. Students are expected to ride to and from events/games on district provided transportation.

Jacksonville Athletics, Coaches, and Transportation Department determine bus departure times. At the coach/advisor’s discretion, students may be signed off the return bus by the parent/guardian.

At the event, the parent/guardian must sign the **Release Sign-Out Sheet** (in the presence of the coach or their delegate) stating their intention to drive their student home, releasing the district from liability.

If the student will be riding to or from an event with another adult, the **Alternative Transpiration Release Form** must be completed and on **file a minimum of 24 hours in advance** documenting the individual responsible for transporting the student. If the student is riding home with another adult, **the approved documented driver will sign the provided Release Sign-Out Sheet in place of the parent at the event.**

\*Requests for alternate transportation to an event, or for someone other than the parent to transport home from an event will be approved on **very limited and case by case basis (for example, extreme family emergency, need to be transported to another school event, etc.).**