



VALLEY VIEW HIGH SCHOOL ATHLETIC DEPARTMENT

6027 Farmersville Pike . Germantown, OH 45327 . 937.855.4116

PARENTAL TRANSPORTATION WAIVER

I REQUEST PERMISSION FOR MY SON/DAUGHTER \_\_\_\_\_

TO RIDE HOME WITH ME, OR \_\_\_\_\_

BEFORE OR AFTER THE \_\_\_\_\_

*Event*

ON \_\_\_\_\_

*Date*

REASON \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I UNDERSTAND THAT THE DRIVER IS **NOT** A VALLEY VIEW BOARD OF EDUCATION EMPLOYEE, **NOR** IS THE VEHICLE OWNED OR INSPECTED BY THE VALLEY VIEW BOARD OF EDUCATION. I AM THE LEGAL PARENT/GUARDIAN OF THE ABOVE NAMED STUDENT.

PARENT SIGNATURE: \_\_\_\_\_

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

COACH'S SIGNATURE \_\_\_\_\_

ADMINISTRATOR'S SIGNATURE \_\_\_\_\_