

**DR. HELEN BALDWIN MIDDLE SCHOOL**

**TRANSPORTATION WAIVER FORM**

**Parent Request to Transport**

I am requesting to provide my own transportation for my child \_\_\_\_\_  
Student Name

To/from a school sponsored athletic event to my home or another location on \_\_\_\_\_  
Date

To/from \_\_\_\_\_  
Location of Athletic Event

**Request for another Adult to Transport**

I am requesting that my child \_\_\_\_\_ be allowed to be transported by  
Student Name  
\_\_\_\_\_ from a school sponsored athletic event to my home or  
Name of Transporting Adult

Another location on \_\_\_\_\_ from \_\_\_\_\_  
Date Location of Athletic Event

In providing my own transportation for/allowing another adult to transport my child I relieve  
Dr. Helen Baldwin Middle School of any liability for his/her safety while he/she is traveling from this  
event.

In recognition of this fact, I am filing this form with the coach of the appropriate sport as required by the  
Policy of Dr. Helen Baldwin Middle School.

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

**\*This form must be filled out 48 hours prior to game and given to the Athletic  
Director for approval.**