Warren County Technical School
Athletic Department
Parent Transportation Form

On behalf of the Warren County Technical School Athletic Department, it is the expectation that all student athletes use school provided transportation to and from an athletic event. In the event a parent/guardian is requesting to transport their child to or from an athletic event, this form must be completed and returned to the coach prior to the event for school approval. Only a student's own parent/guardian is authorized to transport the student to or from away events.

Student Athlete Name: _____

Name of Parent Transporting Student Athlete: _____

Best Phone # to reach Parent: _____

Sport: _____

Event (Location, Opponent, Date, List all that apply) :

1.) _____

Name of Parent/Guardian Transporting student: □ To Event □ From Event □Both To and From event

2.) _____

Name of Parent/Guardian Transporting student: □ To Event □ From Event □Both To and From event

3.) _____

Name of Parent/Guardian Transporting student: □ To Event □ From Event □Both To and From event

4.) _____

Name of Parent/Guardian Transporting student: □ To Event □ From Event □Both To and From event

5.) _____

Name of Parent/Guardian Transporting student: □ To Event □ From Event □Both To and From event

As the parent/guardian of the above listed student athlete, I agree to transport said student athlete to and/or from the listed athletic event. I do understand that this release form only entitles me to transport my own son/ daughter. I will not transport any student athlete other than my own child.

Signature of Athlete: _____

Signature of Parent/Guardian: _____

Signature of Coach: _____

Signature of Athletic Director: _____