



**Scottsdale Unified School District  
Athletic Department Alternate Transportation Consent Form  
(Completion of this form required at the beginning of each Sport season)**

Student Athlete (Please Print) \_\_\_\_\_ I.D. # \_\_\_\_\_

Sport/Season (Year) \_\_\_\_\_ Coach \_\_\_\_\_

**This form must be completed and on file at the beginning of each sport season of the school year prior to any alternate transportation arrangements.**

I give my son/daughter permission to ride to and/or from any athletic event during this sport season with his/her parent(s) or the alternative parent designee(s) listed below (after I have completed a Permission form for that event and submitted prior to the event).

\*\*\*Note: No fellow students or teachers will be approved as parent designee(s) under any circumstances.

**My son/daughter has permission to travel with any of the following individuals (please print):**

1. \_\_\_\_\_  
Name Phone

2. \_\_\_\_\_  
Name Phone

By signing below, I acknowledge that either I or my designee above may have permission to transport my child from the destination. I understand that I or my designees are solely responsible and SUSD is not responsible for supervision and shall not be held liable for anything that occurs as of the time my child is signed out. Specifically, SUSD shall not be responsible for insurance and shall not be held liable for any damages or injuries of any kind that occur at or after the time my child is signed out from the activity. I agree that proper identification (such as a valid driver's license) will be provided to the appropriate SUSD personnel, before the designee(s) listed below will be allowed to sign my child out.

Signature of Parent: \_\_\_\_\_ Print Parent Name: \_\_\_\_\_

Date: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_