



# Heart River

Home of the Cougars!



## Alternate Transportation Request Form

Student: \_\_\_\_\_

Activity: \_\_\_\_\_ Location of event: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this agreement I agree to release Heart River Athletic Dept. (Belfield Public School, Billings County School and South Heart Public School) from any and all liability concerning travel associated with this particular event.

### Self-Transport

I, \_\_\_\_\_ am signing below as the parent/guardian of the above  
Please Print  
named student and I will transport the above named student athlete to/from the event listed above.

To: \_\_\_\_ From: \_\_\_\_ Both: \_\_\_\_

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

### Others transporting my child

The following parent/guardian that will be transporting my child: \_\_\_\_\_  
Print Name

To: \_\_\_\_ From: \_\_\_\_ Both: \_\_\_\_

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