



ASHLAND CITY SCHOOLS

Ashland Middle School ♦ 345 Cottage Street ♦ Ashland, Ohio 44805 ♦ 419 289-7966 ♦ Fax 419 289-2303

**ASHLAND MIDDLE SCHOOL  
PARENT TRANSPORTATION REQUEST**

Students are required to ride school transportation to and from school activities that take place out of town. This requirement covers the school's liability for these students and also fulfills their obligation to the group and/or team they represent.

Common sense and legalities allow exceptions such as away trips where parents and family will be staying in town overnight to visit relatives, etc. We do not want to inconvenience the parent or student by having them make unnecessarily long trips (i.e. to Newark, back to Ashland, back to Newark area).

This request should not be made for students who are returning home with their parents for the reason of stopping to eat, etc. This request should be used when an extreme inconvenience exists. Approval will only be considered when the transporting member is the parent(s) or legal guardian. Approval will not be considered for friends or other family members.

I REQUEST THAT MY SON/DAUGHTER \_\_\_\_\_  
*NAME*

BE ALLOWED TO TRAVEL WITH US/ME AFTER THE \_\_\_\_\_  
*SPECIFIC EVENT*

REASON FOR REQUEST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_  
*PARENT SIGNATURE*

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_  
*HEAD COACH/ADVISOR*

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_  
*PRINCIPAL/ATHLETIC DIRECTOR*

\_\_\_\_\_  
APPROVED  
\_\_\_\_\_  
NOT APPROVED

A SIGNED APPROVED COPY OF THIS REQUEST MUST BE GIVEN TO THE COACH AND/OR ADVISOR BEFORE THE BUS DEPARTS FOR THE TRIP.



ASHLAND CITY SCHOOLS

**Ashland Middle School** ♦ 345 Cottage Street ♦ Ashland, Ohio 44805 ♦ 419 289-7966 ♦ Fax 419 289-2303