



Fairmont High School  
3301 Shroyer Road  
Kettering, OH 45429  
Phone: (937) 499-1640

**KETTERING FAIRMONT HIGH SCHOOL  
ALTERNATE TRANSPORTATION FORM**

**(Must be on file with Coach 24 HOURS PRIOR to contest)**

STUDENT'S NAME: \_\_\_\_\_

SPORT: \_\_\_\_\_

TO       FROM       TO and FROM

DATE (S) OF ACTIVITY: \_\_\_\_\_

ACTIVITY LOCATION: \_\_\_\_\_

To Coach:

As Parent(s)/Guardian of \_\_\_\_\_ I (we) understand that in accordance with Kettering City Schools Board Policy, students are required to ride Board approved transportation **TO** and **FROM** all athletic events. Departure from this requirement will release the Kettering City School District from all liability for any adverse results that may occur.

We, therefore, assume all responsibility for the safety and well-being of said student immediately upon detachment from the school sponsored activity.

**\*\*Notice: Reason must be specific and sufficient to justify riding with the parent. It does NOT permit the student to self-transport or to leave an event early without prior permission from the Coach.**

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

DATE: \_\_\_\_\_

1. Parent / Guardian Signature: \_\_\_\_\_

2. Student Signature: \_\_\_\_\_

3. Coach Signature: \_\_\_\_\_

**Request Approved:** \_\_\_\_\_ **Request Denied:** \_\_\_\_\_