Ankeney Middle School
4085 Shakertown Road
Beavercreek, OH 45430
(937) 429-7567
FAX (937) 429-7685

Inspiring today, preparing for tomorrow

(Please complete, sign and return to Main Office – Activities, Athletic Office – Sports)

SPORT/ACTIVITY: __________________________________________

DATE OF ACTIVITY: _________________________________________

ACTIVITY LOCATION: _________________________________________

To Principal / Athletic Director:

As Parent(s)/Guardian(s) of _______________________________________ I (we) understand that the usual school policy regarding school sponsored student trips is that students leaving school by bus must also return by bus.

Unusual circumstances have arisen, as described below, that requires our son/daughter to return home with us (the parent or guardian) rather than on the above mentioned school bus.

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

**Notice: It is understood that the request must be an unusual circumstance and may not be approved after the proper form has been submitted.

Reason for request: __________________________________________

______________________________________________________________

Date: __________________________

1. Parent/Guardian Signature: ________________________________

2. Student Signature: __________________________________________

3. Principal / Athletic Director Signature: ______________________

   Request approved: ______________ Request denied: ______________

4. This form is to be returned to the coach/advisor upon completion.

5. Coach/Advisor’s signature: ________________________________