

**ISSAQUAH SCHOOL DISTRICT
PARENT/GUARDIAN PERMISSION FORM
Parent Authorization for Alternate (or Non-Parental)
Transportation**

Use for parents to request someone other than him/herself to pick up a student after an event.

Description of Activity: _____

Date of Activity: _____ Location of Activity: _____

I hereby acknowledge that I have read, understood and agreed to the following:

As parent or guardian of _____
(Print Student's Name)

who attends _____
(School Name)

A. I hereby give my permission for my student to be released to the following person when the activity described above is finished:

(Name of person authorized to pick up student) (Phone # for authorized person)

I understand that as parent or guardian, by signing this form I am immediately responsible for my student when they are released by Issaquah School District Staff per the above instructions.

Parent's Phone: Home _____ Cell _____

Signature of Parent/Guardian

Date