



# Port Jervis

CITY SCHOOL DISTRICT

Superintendent of Schools  
9 Thompson Street, P.O. Box 1104  
Port Jervis, New York 12771

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**PERMISSION FOR PARENT PICK-UP FROM OFF-SITE FIELD TRIPS/GAMES/PRACTICES**

Name of Student: \_\_\_\_\_ Trip or Team: \_\_\_\_\_

Location of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

The reason for not riding the bus back to the school is: \_\_\_\_\_

I understand that the Port Jervis City School District will be providing transportation for this trip. I understand the rules require that students ride buses to and from all field trips, athletic events and off-site practices. A departure from this requirement will release the Port Jervis City School District from all liability for any adverse results that may occur. Students may only be transported home by their parent or guardian. Permission will not be given to ride with friends, relatives or parents of other students. If you have an extenuating circumstance, please contact the Principal or Athletic Director.

I agree to release the Port Jervis City School District and its employees and officers from all liability with reference to the above-stated transportation.

My son/daughter will be transported home by: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**This form must be submitted to the Principal or Athletic Director the day preceding the event. An approved copy will be given to the Teacher/Coach prior to the trip's departure.**

\_\_\_\_\_  
Signature of Principal or Athletic Director

\_\_\_\_\_  
Date

Copy to Teacher/Coach: \_\_\_\_\_

Date: \_\_\_\_\_