

**BYRAM HILLS SCHOOL DISTRICT**  
**ACTIVITY BUS AGREEMENTS: School, Parents, Activity Providers**

**2018 - 2019 School Year**

By signing this form below, parents and activity providers indicate agreement to the Byram Hills requirements for use of activity buses. One form is required for *each* Activity, signed by both parent and activity provider. We ask parents to sign the form, the activity provider to collect the signed forms from parents, and then deliver the complete set, together with a roster listing all the names, in advance of the start date.

STUDENT NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

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

DAY(S) OF WEEK ATTENDING ACTIVITY: (circle) M T W TH F

RANGE OF DATES STUDENT WILL ATTEND THIS ACTIVITY:

From: \_\_\_\_\_ To: \_\_\_\_\_

SIGNATURES: I agree to the District's requirements for providing this transportation.

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

Emergency Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

ACTIVITY PROVIDER: \_\_\_\_\_ DATE: \_\_\_\_\_

Contact Person @ Activity Center: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*\* Parents – Please deliver this form to the activity provider, and remember, on a daily basis, to inform the school via the “Byram Hills Transportation Note” forms already in use - daily notes will still be required in addition to this general permission.**

**\*\*\* Activity Providers – Please deliver this form, proof of insurance, and a Byram Hills Activity Roster, listing all participants who will be riding the Byram Hills activity buses, to the TRANSPORTATION DEPARTMENT.**