



TO: Parents of SCCS Athletes

FROM: Dennis Faber, Athletic Director High School

RE: New OHSAA Directories

Please be alerted to this new OHSAA directive – Read and Be Aware:

### TRANSPORTATION TO AND FROM INTERSCHOLASTIC CONTESTS

It is the responsibility of the Board of Education or other governing board of a member school to provide for the safe transportation of student-athletes and other contest participants to and from athletic events. The OHSAA Lifetime Catastrophe Accident Insurance Policy covers team or group travel directly to and from a covered event. A covered event is defined by the OHSAA (the authorized policy holder) as any regular season (included scrimmages and previews) or tournament competition in an interscholastic athletic event, either OHSAA recognized or non-recognized, sponsored by the Board of Education or governing board of a member school. Travel must be supervised by staff members or designated representatives of the member school.

Therefore, it is recommended that schools require student-athletes and other participants in interscholastic athletic events to travel with their school squads in school-authorized carriers. It is not recommended that students be released to travel with parents or other persons; however, permission to make alternative travel arrangements remains the purview of the Board of Education/governing board of the member school. In the event that such alternative arrangements are approved, it is strongly recommended that the Board of Education secure proof of insurance from those who will be providing the transportation.

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

**SCCS TRANSPORTATION RELEASE FORM**

STUDENTS NAME: \_\_\_\_\_

ATHLETIC CONTEST AND SITE: \_\_\_\_\_

DATE OF CONTEST: \_\_\_\_\_

REASON FOR NOT RIDING SCHOOL  
PROVIDED TRANSPORTATION: \_\_\_\_\_

PERSON PROVIDING RIDE HOME: \_\_\_\_\_  
(MUST BE 21 YEARS OF AGE)

\*INSURANCE OF PERSON PROVIDING TRANSPORTATION:  
(COPY OF INSURANCE CARD ATTACHED)  
\_\_\_\_\_

SIGNATURE OF PARENT: \_\_\_\_\_

**THIS FORM IS TO BE RECEIVED BY THE ATHLETIC DIRECTOR  
WITH 24 HOURS NOTICE OF A SCHEDULED EVENT/OR THE DAY  
BEFORE.**

APPROVED \_\_\_\_\_

DISAPPROVED \_\_\_\_\_

\_\_\_\_\_  
Dennis Faber  
ATHLETIC DIRECTOR