



New Lenox School District 122
102 South Cedar Road, New Lenox, Illinois 60451
Phone 815-485-2169 Fax 815-485-2236

Authorization of Transportation Form

Name of Participant: _____

For the _____ (print name of event) on
_____ (print date(s) of event), my child will not be utilizing New Lenox
School District 122 transportation to and from the event. Instead, my child will have the following
transportation arrangements (please check the appropriate response):

My child will travel to the event utilizing New Lenox School District transportation and will return
with a family member or another adult.

Name of person transporting child _____

My child will be traveling both to and from the event with his/her family member(s).

My child will be traveling to the event with his/her family member(s) and returning with another
adult.

Name of person transporting child _____

My child will be traveling to the event with another adult and returning with his/her family
member(s)

Name of person transporting child _____

My child will travel both to and from the event with another adult.

Name of person transporting child _____

Signature of Parent/Guardian

Date