

ACTIVITY TRANSPORTATION RELEASE

STUDENT NAME _____ GRADE _____

SPORT _____ COACH _____ EVENT DATE _____

PARENT'S NAME TO BE RELEASED TO _____

CELL PHONE NUMBER OF PERSON LISTED ABOVE _____

REASON FOR REQUEST _____

STUDENTS ARE EXPECTED TO TRAVEL TO AND FROM SCHOOL SPONSORED EVENTS IN SCHOOL OPERATED VEHICLES. EXCEPTIONS CAN ONLY BE APPROVED BY THE ADMINISTRATION. WHEN THIS SITUATION OCCURS, THE STUDENT MUST RECEIVE PERMISSION FROM THE ATHLETIC DIRECTOR OR HIS DESIGNEE AND HAVE THIS RELEASE FORM SIGNED AND ON FILE IN THE ACTIVITIES OFFICE AT LEAST 24 HOURS PRIOR TO THE TEAMS DEPARTURE FOR THE ACTIVITY IN QUESTION. ONLY AFTER THIS CRITERIA HAS BEEN MET WILL THE STUDENT BE RELEASED TO HIS OR HER PARENT OR LEGAL GUARDIAN. THIS FORM AND THE RELEASE TO THE PERSON NAMED ABOVE RELEASES USD #325 OF THE RESPONSIBILITY OF TRANSPORTING THE STUDENT AFTER THE EVENT.

_____/_____/_____ _____ _____ _____
PARENT SIGNATURE DATE A.D. SIGNATURE DATE

_____/_____/_____
SIGNATURE OF PERSON STUDENT IS RELEASED TO IF OTHER THAN PARENT/GUARDIAN
COACH'S COPY

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