



Athletic Trip Release

I hereby authorize my son or daughter to be transported from the district athletic trip in the manner described below:

Date of Activity: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Alternate Transportation: \_\_\_\_\_

Please indicate the name of the individual transporting the student:

\_\_\_\_\_  
***(The individual may be asked to provide identification such as driver's licenses if the faculty member or coach does not know them.)***

Time student is to be released:

Printed Name: \_\_\_\_\_

Signature of Parent or legal guardian: \_\_\_\_\_

Telephone #: \_\_\_\_\_

This form must be filed in the HS main office 24 hours in advance.  
The student will be released after a signature has been obtained.

cc: Administration  
Athletic Director

