



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**

