

Coach: _____

Date: _____

**CENTENNIAL SCHOOL DISTRICT
ATHLETIC DEPARTMENT
TRAVEL RELEASE**

This is to certify that _____ Grade _____ has my permission to ride from
the athletic contest or practice on _____ at _____.
(Date) (Location of contest)

I certify that:

CHECK APPROPRIATE BOX BELOW:

1. I am personally transporting the above named student.

2. I give permission for the above named student to ride with an adult.

(Name of person driving vehicle)

The reason for not riding the bus is: _____
(Reason must be sufficiently urgent to family needs to justify not riding the bus.)

I understand that Centennial School District Athletic Rules require students ride buses to and from all athletic events and a departure from this requirement will release the Centennial School District from all liability for any insurance would not provide coverage for the above vehicles.

I agree to release the Centennial School District, it's employees and officers from all liability with reference to the above stated transportation.

This form **must** be on file in the Athletic Office **prior** to the dismissal of school on the day of the contest.

Signature of Parent or guardian

Signature of Athletic Director

APPROVED

NOT APPROVED