Athletes must travel together as a team on school provided transportation (exceptions may be granted with <u>advanced</u> <u>notification</u>.)The below form must be completed, signed and returned to a coach before the day of the tournament.

## MANKATO EAST HIGH SCHOOL ATHLETIC/ACTIVITIES DEPARTMENT

Todd Waterbury – Athletic/Act	ivities Director	Phone 507-387-5655 Fax 507-387-5899	
EVI	ENT TRAVEL RELEASE	(Today's Date)	
This is to certify that	(Student's Name)	has my permission (Grade)	
to ride (to/from/both) eve (circle one)	nt(Activity-level participating,	athletic/activity contest	
on,	at		
(Date of Contest)	(Location of Co	ontest)	
I certify that I am persona	ally transporting my son/ da	ughter listed above.	
NAME PHONE			
students ride the buses to	and from all athletic/activiti	OOL ATHLETIC/ACTIVITIES RULES require that es events and a departure from this requirement will ISTRICT from liability for any adverse results that	11
occur.			
	THE MANKATO AREA S the above stated transportat	CHOOL DISTRICT and its employees and officers ion.	s from
Please submit this	s form to the Coach prior	to departure. Thank you.	
APPROVED		SIGNATURE OF PARENT	
NOT APPROVED	SIGNATUR	E OF COACH OR ADMINISTRATOR	