

LISD ATHLETE TRANSPORTATION RELEASE FORM

Date: _____

School: _____

To Whom It May Concern:

My daughter / son _____ will be riding

_____to the game with me

_____from the game with me

_____ both to/from the game

_____ (Event and Site, and Date of Contest)

I, as the parent, have notified the coach personally and understand the school will be released from liability. I also understand the school district prefers all athletes to ride to and from all away events on school provided transportation and that this is an exceptional situation.

Printed name of Parent / Guardian

Signature of Parent / Guardian

Parent Email and Phone Number