



BLUE DEVIL ATHLETICS

TRAVEL RELEASE FORM

WHEN ATHLETE IS TRAVELING HOME WITH THEIR PARENT OR GUARDIAN

This is to certify that _____ requests permission to ride from
Student Name

the athletic contest on _____ at _____.
Date Location

I certify that I am personally transporting the above named student-athlete and am the parent / guardian of the above named student-athlete.

I understand that the Evansville Community School District requires that students ride school transportation to and from events, and a departure from this requirement will release the ECSD from the liability for any adverse results that may occur.

I agree to release the Evansville Community School District and its employees and officers from all liability with reference to the above stated transportation.

Signature of Parent / Guardian

Date