



## St. Clair High School

### Activities Department

#### Event Travel Release:

This is to certify that \_\_\_\_\_ has my permission

(Student's name)

(Grade)

To ride (to / from /both) \_\_\_\_\_ athletic / activity contest

(Circle one)

(Activity - Level Participating)

On, \_\_\_\_\_ at \_\_\_\_\_

(Date of Contest)

(Location of Contest)

I certify that I am personally transporting my son / daughter listed above.

Name \_\_\_\_\_ Phone \_\_\_\_\_

I understand that the St. Clair High School Activities rules require that students ride the buses to and from all events and a departure from this requirement will release the St. Clair Public School District from liability for any adverse results that may occur.

I agree to Release the St. Clair School District and its employees from liability with reference to the above stated transportation.

Please submit this form to the coach prior to departure. Thank you.

\_\_\_\_\_ Signature of Parent