



Poston Butte High School Athletics

PARENTAL TRANSPORTATION RELEASE

I, as the legal guardian of _____, desire to
(Student Name)

pick up my son/daughter after the scheduled athletic contest at:

_____ on _____
Name of School or Location Date

I understand that the Florence Unified School District require that student athletes ride school transportation to and from all athletic events. Please allow this form to serve as my formal request to deviate from that policy, and allow my son/daughter to travel with me at the conclusion of the above mentioned contest. I hereby release the Florence Unified School District and its responsible official of any and all liability resulting from any adverse results that may arise as a result of this deviation. I accept and assume full responsibility for the safe transportation of my son/daughter home.

My signature below, coupled with my taking charge of my son/daughter at the specified time and place, indicates full understanding of the statement listed above and serves to release the Florence Unified School District of liability.

Parent Signature

Date

Administrator

Date