

Travel Release



Date: \_\_\_\_\_

MUSD provides transportation for its athletes to athletic events. Alternative transportation may be used on an emergency and infrequent basis. This form must be completed and turned into the Athletics Office at least 24 hours prior to team departure.

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Sport: \_\_\_\_\_

Location: \_\_\_\_\_

Coach: \_\_\_\_\_

Reason for not riding the bus \_\_\_\_\_

I, \_\_\_\_\_ verify that I am the legal parent or guardian of the above named student. I release Maricopa Unified School District #20 from any and all responsibility related to this travel.

You will be required to show ID to the coach

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Athletic Office Signature: \_\_\_\_\_