LISD ATHLETE TRANSPORTATION RELEASE FORM

Date:	School:
To Whom it May Concern:	
My daughter/son	will be riding home from
	(event & site) with me. I, as the parent,
have notified the coach personally a	nd understand the school will be released from liability
as soon as the facility is left. I also u	nderstand the school district prefers all athletes to ride
to and from all away events on scho	ol provided transportation and that this is an
exceptional situation.	
Printed name of Parent / Guardian	Signature of Parent / Guardian