

Date:

Request to Release Athlete To Parent/Guardian



Re: Spo	ort:
Atniete's Name	
I/We am/are requesting that the above named athlete be following date: Date of Event:	released to our custody from the game on the
Reason:	
I/We will be transporting our student athlete home in our the team on the bus or van. I/We understand that our sign of a coach on this form if this request is approved by the that a valid (driver's license) is required.	nature below must be countersigned in the presence
IT IS FULLY UNDERSTOOD THAT THE APPLE VALLEY RESPONSIBLE, NOR DOES THE DISTRICT ASSUME LESULTING FROM THIS NON-DISTRICT SPONSORED HEREBY WAIVES THE RIGHT TO BRING ANY CLAIM FOR DAMAGE ARISING IN ANY WAY OUT OF SUCH TRANS UNDERSIGNED RELEASES THE APPLE VALLEY UNIF BOARD, ITS EMPLOYEES, VOLUNTEERS, COACHES, RESPONSIBILITY, WHETHER CAUSED BY NEGLIGEN PARTY.	LIABILITY, FOR ANY INJURIES OR LOSSES O TRANSPORTATION AND THE UNDERSIGNED FOR PERSONAL INJURIES OR PROPERTY SPORTATION OR ARRANGEMENTS. THE FIED SCHOOL DISTRICT, THE GOVERNING AND AGENTS OF ALL SUCH CLAIMS OR
Parent/Guardian Full Name(Print):	Parent/Guardian Signature
Date:	
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Approved by Athletic Director/Asst. Principal: Mr. Daniel Rincon	Date:
Parent/Guardian Signature (Signed in presence of Coach)	Date:

Instructions for Parent/Guardian: Please complete this form and have your student return it to the Athletic Office at least 48 hours before the intended athletic event. Upon approval of the request, the coach will be notified and given a photocopy of this document. The parent will need to show identification and countersign at the event to confirm identification. This form must be completed anytime you are requesting your student athlete be released from riding district transportation.