

SENECA VALLEY

Travel Release Form



This is to certify that	has my permission to not ric	de on District
(Student's Name)		
transportation to/from the athletic contest/school event on	20a	t
	(Date)	(Location of Contest)
Please mark ALL appropriate boxes & secure all require	<u>d signatures</u>	
$\ \square$ I certify that I am personally transporting the above named $:$	student to/from the contest/e	vent.
== OR ==		
$\ \square$ I give permission for my child to transport themselves to/fro	om the contest/event.	
The reason for not riding the bus is		
□ Legatify that Lating paymainsion for		
☐ I certify that I give permission for(Sup	pplementary Parent/Adult Name)	
my child(Student's Name)	to/from the contest/ever	nt.
☐ I certify that I accept responsibility to transport		to/from contest/event.
	(Student's Name)	
•••••		
I understand that the Seneca Valley School District rules recand a departure from this requirement will release the Sene results that may occur.		
Students can not be transported by other students to/from	the event. No Exceptions.	
I agree to release the Seneca Valley School District and its estated transportation.	employees from all liability with	n reference to the above
This form must be personally handed to	the coach prior to the event b	y the parent.
(Cignoture of Porent or Cuerdian)		(Data)
(Signature of Parent or Guardian)		(Date)
(As needed—Signature of Supplementar	v Parent or Guardian)	(Date)