



# Independent School District 318 Activities Department

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## TRAVEL RELEASE FORM

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

Team/Activity: \_\_\_\_\_

Site of Trip: \_\_\_\_\_

Date of Trip: \_\_\_\_\_

As a parent or guardian of the above named student I will be transporting my son/daughter from the above named site and will assume full responsibility for his/her safety and well being for the remainder of this trip.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_