

Transportation Release Form

Clawson High/Middle School
Athletic Department



This is to certify that _____ has my
(Student's Name)

permission to ride (TO FROM) the _____ activity on
(Circle one) (Sport)

_____ at _____
(Date) (Location)

I certify that I am personally transporting the above named student, or have arranged for transportation with an adult of my choosing for this student.

The reason for not riding the bus is:

I hold Clawson Public Schools, its officer, employees, and agents harmless from all liability and claims as a result of my request for the removal of my child from district transportation.

Signed: _____
Parent/Guardian Date

Please sign at time of pick-up only:

Signed: _____
Parent/Guardian Date

I verify the above student was released to parent/guardian, or adult of their choosing at time of release.

Signed: _____
CHS Employee/Coach Date