

JOHN STARK ATHLETICS PARENTAL TRANSPORTATION RELEASE FORM

I, (Person Transporting Student – **Column A**), *parent/guardian*, accept responsibility for transporting (Student’s Name – **Column B**) as per signed Parental Transportation Release Form.

Dated this _____ day of _____, 20____ (Column D)

Advisor or coach should have verbal contact with parent/guardian before student leaves.

Game: JOHN STARK @ _____

Team

Venue

Column A	Column B	Column C	Column D
Person Transporting Student - Print	Student Name - Print	Person Transporting Student Signature - Sign	Date

First Violation: Students who violate the transportation release procedure will not be allowed to participate in the next scheduled competition.

Second Violation: Student who violate the transportation release procedure will not be allowed to participate for the remainder of the year.

