



CONTEST TRAVEL RELEASE FORM

Date _____

The is to certify that the student athlete listed below has my permission to drive or ride to

_____ contest on _____ at _____
(Name of sport) (Date) (Location)

I agree to release the Marcellus School District and its employees and officers from all liability with reference to the above stated request.

Parent Signature _____ Date _____

Coaches Signature _____ Date _____

Athletic Director Signature _____ Date _____

DEDICATION * DETERMINATION * DESIRE * DISCIPLINE