

ALTERNATE STUDENT TRAVEL FOR SCHOOL EVENTS

It is requested that my son/daughter, _____,
Name

be permitted to travel to/from (circle) _____
Destination of Trip

with _____ at _____.
Driver's Name *Departure Time*

The reason for this alternate method of travel is _____
_____.

I hereby release Brazosport Independent School District and any sponsoring staff member(s)
from any and all liability related to this alternate method of travel from this school trip.

Parent/Guardian Signature

Date

School

Organization

Notary needed ONLY if alternate method of travel is with a Non-Guardian

STATE OF _____ COUNTY OF _____

Subscribed and sworn to before me this the _____ day of _____,

SEAL

NOTARY
PUBLIC _____

APPROVED _____

DATE _____

DISAPPROVED _____

Signature of Sponsor or Designee