PARENTAL AUTHORIZATION AND RELEASE FROM LIABILITY FORM TRANSPORTATION IN NON-SCHOOL VEHICLE FROM A SCHOOL-SPONSORED ACTIVITY

	Name of Student:	Grade:
	Name of Parent(s)/Guardian(S);	
	Address:	Phone:
	I hereby authorize my above-named	child to leave the
	(state school-sponsored activity) in	another individual's vehicle.
If a student is authorized to ride in another individual's prinally, we acknowledge having had an opportunity to revide the student with a representative of our choosing.		er of said vehicle shall be solely liable on or property related to or caused by ance shall be the primary insurance in icates that if we had any questions activity and /or this document, we have been fully addressed/resolved. an opportunity to review this
	Parent or Guardian Signature	Date
	Parent or Guardian Printed Name	<u></u>
	Student Signature	Date
	Student Printed Name	±
)	Driver Signature	Date

Driver Printed Name