THIS FORM MUST BE COMPLETED AND GIVEN TO THE COACH BEFORE THE ATHLETE MAY BE TRANSPORTED PERSONNALLY

EAU CLAIRE HIGH SCHOOL ATHLETIC DEPARTMENT TRAVEL RELEASE

This is to certify that _____ has my permission to ride
(athletes name)

(check one) ☐ TO ☐ FROM ☐ TO and FROM

the _____ contest on _____ / _____ / _____
(sport) *(date)*

at _____.
(location of contest)

I certify that I am personally transporting the above-named athlete, or have arranged for transportation with an adult (non-student) of my choosing. I understand that the WIAA requires all schools to provide transportation to and from athletic events in approved transportation. By departure of this requirement I agree to release Eau Claire High School and its employees from all liability for any adverse results that may occur.

_____ _____
(parent/guardian signature) *(date)*