

Plainfield Community Consolidated School District 202

Aux Sable Middle School

Parent Release Form

I _____ (parent/guardian's name printed) hereby give permission for my child _____ (student's name printed) to ride home from an away event with the adult listed below, on the date indicated. I understand this form must be on file with the coach/sponsor of the activity at least 24 hours prior to the first date listed, and the coach will adhere strictly to the dates and names listed.

DATE of EVENT

LOCATION of EVENT

RESPONSIBLE ADULT

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

My signature below represents agreement with the stipulations as outlined above.

Parent/guardian Signature Date