

Arlington Central School District

TRAVEL RELEASE

Return to: *Mr. Keech, Director*
Due: **No later than 48 prior to departure**

Date of Release Submission: _____

This is to certify that _____ has my permission
Student's Name

to ride home with _____ from the Marching
* Name of parent or other responsible adult

Marching Band trip on _____ at _____
Date** Location of Event

*** If not the parent, this must be an adult relative, parent of another Marching Band member, or other responsible adult 21 years of age or older. The designated person **MUST BE PREPARED TO SHOW PICTURE IDENTIFICATION** before picking up Band member.**

****This form MUST be turned in at least 48 hours prior to the Band's departure for the trip event.**

NO EXCEPTIONS!

I certify that the above named driver is personally transporting the above named student. I understand that the Arlington Central School District rules require that students ride the buses to and from all Marching Band events and a departure from this requirement will release the Arlington Central School District from all liability for any adverse results that may occur. I agree to release the Arlington Central School District and its employees and officers from all liability with reference to the above stated transportation.

I understand that I, or the person designated herein, must personally check out with a chaperone or staff member prior to leaving with my child.

Printed Name of Parent/Guardian

Signature of Parent/Guardian