## PETERS TOWNSHIP ATHLETIC DEPARTMENT

## **Athletic Travel Release Form**

This is to certify that	(student's name) has my permission
NOT to ride the bus home from the	(sport) athletic contest
on(date) from	(location of contest).
I certify that I transporting the above named student fron	(name of parent/guardian) am personally n this event.
I certify that	(name of adult other than parent) has my tudent from this event.
The adult responsible for transportation mu when taking a student from an event prior	ust personally see the advisor or coach in charge to the event.
to and from all athletic events. Any delinea	ool District's Policy requires a student to ride the bus ition from this requirement policy will release the pility for any adverse results which may occur.
I agree to release the Peters Township Scholiability with reference to the above stated	ool District and its employees and officers from all transportation.
_ ,	Guardian, Athletic Director/Principal and Head nship. When possible, this form should be turned ad coach will retain this form.
Signature of Parent /Guardian	Signature of Head Coach
Signature of Athletic Director/Principal	
264 East McMurray Road	Athletic Director – Brian Geyer, CAA

McMurray, PA 15317 724-941-6250 (Phone)

Athletic Secretary – Jami Christopher Athletic Secretary – Debra Christman