## Avon Lake High School 175 Avon Belden Road Avon Lake, Ohio 44012 (440) 933-5164

DATE
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## **AVON LAKE HIGH SCHOOL TRAVEL RELEASE FORM**

This is to	certify that			has my permission	
(Student's Name)					
to ride (to	from	_ both	) the		
	(Check One)			(Activity)	
on	, 20	; a	ıt		
			(L	ocation of Event)	
I certify t	that I am personally tra	ansporting th	e above named	student, or have arranged for	
transportation w	ith an adult (non-stude	ent) of my cho	oosing for this s	tudent.	
The reason for no	ot riding the bus is				
(Reason	n must be sufficiently u	argent to fami	ly needs to just	ify not riding the school bus)	
I unders	tand that the Avon Lak	ce High Schoo	ol requires that s	students ride the provided	
				are from this requirement will release	
	ity School District from				
I agree to	o release the Avon Lake	e City School	district and its	employees from all liability with	
	above stated transporta				
This forn	n must be signed by th	e Parent (s)/I	egal Guardian	(s) and the Advisor, and will serve for	
only the date and	d listed.				
			_		
(Signature of	Parent(s)/Guardian(s)			(Date)	
(Signature of Advisor)				(Date)	