

ATHLETE RELEASE FORM 2022-2023 School Year

Athlet	te's Name:	Athlete's G	rade:
Sports	s Season: Fall Winter Spring	Athlete's Sport: Soccer / Volleyball / Basketball	/ Flag Football / Softball
from liabilit	athletic events. There are several	Il use the transportation provided by the schoo reasons for this procedure, but foremost are s there are exceptions or extenuating circumstanc	afety, security, and legal
	Permission to Relin	quish My Child's Custody to Parent/Gu	ıardian
trans _i releas will p	port my child from a McCabe E se the McCabe Union School Dis	McCabe Elementary School student, I am red lementary School sporting event in my own trict of all liability of my child once the stude the following information as well as a copy	n automobile. I hereby ent is under my care. I
		License & Current Auto Insurance Card for family menase check expiration dates.	mbers listed below.
My chi		cy information / must be 18 years of age) to be relea	
#1	Name: Driver's License Number:		
,, _	Auto Insurance Carrier:	Policy Number: Exp	Date:
	Name:	Relationship to Student:	
#	Driver's License Number:	Exp Date:	
	Auto Insurance Carrier:	Policy Number: Exp	Date:
Parent/Guardian Name:		Cell Phone:	
Parent/Guardian Signature:		Date:	
FOR D	DISTRICT USE ONLY:		

Administrator Signature: _

Athletic Director Signature: ___