

# GRACE ATHLETICS CONSENT TO TRAVEL RELEASE

This is to certify that \_\_\_\_\_ has my permission to ride  
(student's name)  
(to-from-both) the \_\_\_\_\_ athletic contest on \_\_\_\_\_ at  
(sport) (date)  
\_\_\_\_\_  
(location of contest)

I certify that I am personally transporting the above-named student(s), or have  
arranged for transportation with \_\_\_\_\_  
(Adult-non-student)

I understand that Grace Lutheran athletic rules require riding to and from games with volunteer drivers. I understand that the driver's have all given insurance information to the appropriate people. I understand that Grace Lutheran will not be held liable for any adverse results that occur.

I agree to release Grace Lutheran School and its coaches from all liability with reference to the above stated transportation.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date signed)

Return or fax (623-937-4390) this form to Grace Lutheran, The coach of the sport or athletic director prior to the contest.