ST. JOHNS MIDDLE SCHOOL
TRANSPORTATION RELEASE FORM

DATE: _________________

This is to certify that ______________________ has my permission to ride
(student name)

(to – from) the ______________________ activity on ______________________
(circle one) (Sport) (date)

at ______________________. I certify that I am personally transporting the above
(Location) named student or have arranged for transportation with the adult of my choosing for this
event.

The reason for not riding the bus is: ________________________________

________________________________________

I understand the St. Johns Middle School Activities Rules require that students ride the
buses to and from all activity events and a departure from this requirement will release
the St. Johns School district from all liability for any adverse results that may occur.
I agree to release the St. Johns School District and its employees and officers from all
liability with reference to the about stated transportation.
This form must be presented to the athletic director for approval at least one day
in advance of the event.

APPROVED – NOT APPROVED

________________________________________
(Parent signature)

________________________________________
(Activity Director signature)