Parental Consent for Third Party or Personal Transportation of Student to or from a School Event

I hereby authorize	who is an adult over 18 years old to
I hereby authorize(Name of Third Party)	
transport to/fro (Name of Student)	om the following school function:
(
Event:	
Date:	
	District from all responsibility and liability regarding my
son/daughter as if the distric	ct had released him/her to me personally.
Parent/Guardian Signature:	
Date:	
Verified by:	
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I accept responsibility for	Name of Student) and assume
full responsibility for his/her safety and	l well-being.
As his/her parent/guardian	
In the name of his/her parent or g	uardian
Date:	
Time:	
Location:	
	Print Name:
	Print Name:
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I verified the identity of the above name	ed adult and released the student into his/her custody.
School Employee Signature	: