



Sheridan YellowJackets Athletic Transportation Release Form

Name of Student-Athlete: _____ Grade: _____
(Please Print)

Name of Parent/Guardian: _____
(Please Print)

Student-athlete listed above, who participates in the Sheridan Athletic Program, will adhere to the departmental policy for student-athlete travel to and from athletic events, including but not limited to practices, games, tournaments, meets and matches. I am fully aware the school and its athletic program offer transportation to and from competitions. It is my understanding he/she will ride from the competition in a vehicle provided by the Sheridan School District or with his/her parent(s)/guardian(s).

It is my understanding that if my student athlete is released after an event and is transported by any other means than the one provided by the Sheridan School District the legal parent/guardian must sign the athlete out with the appropriate coach.

In the absence of the legal parent/guardian, permission is given to the following people to transport my student athlete. I further understand that the person transporting my Sheridan student athlete must be 21 years of age or older, be able to present a photo ID, and sign the athlete out with the responsible coach.

I give permission to the following to transport my child in my absence: (Please Print)

1. _____	_____
Name of Person Transporting	Cell Phone Number
2. _____	_____
Name of Person Transporting	Cell Phone Number
3. _____	_____
Name of Person Transporting	Cell Phone Number
4. _____	_____
Name of Person Transporting	Cell Phone Number

_____	_____
Signature of parent/guardian	Date

Any violation of this policy could result in the student athlete being no longer able to travel with the Sheridan Athletic programs.

Please return this form to the Athletics Director's Office