HUNTINGTON ATHLETIC DEPARTMENT



TRANSPORTATION RELEASE FORM

This form must be properly completed, signed and returned to the athletic office at least one day prior to the extracurricular activity in order to obtain the release of a child from the transportation provided back from the site by the District. A new form MUST be completed <u>each time</u> the release of a child is sought from the transportation provided by the District.

I, , request that the	e District release my child,
(Parent – PLEASE PRINT)	e District release my child,(Student – PLEASE PRINT)
□ Into my custody (PARENTS/GUARD)	IANS ONLY – no address needed)
$\Box \qquad \text{Into the custody of a third party - *All}$	third party releases will require a photo ID
First & Last Name:	PLEASE PRINT CLEARLY)
(F Relationship to Student:	PLEASE PRINT CLEARLY)
Address & Contact number:	
School (please check one): Finley Middle School	ol 🗌
Huntington High Sch	lool
Date of Activity: Sport:	Location:
Level of Sport (please check one): JV:	Varsity: Middle School:
Reason why child cannot return with the team:	
	r authorizing his or her transportation back from the site of d party. I understand that under no circumstances will the son named on this form.
	E-mail: nhaas@hufsd.edu
(Signature of Parent/Legal Guardian)	or
	Athletic Office Fax Number:

631-425-4725

(Cell Phone of Parent/Legal Guardian)