

WESTON COUNTY SCHOOL DISTRICT #7

**SUPERINTENDENT: TROY CLAYCOMB
ACTIVITIES DIRECTOR: FRANK PAUTZ
PHONE: 468-2461**

**PRINCIPAL: GARY GLODT
K-8 PRINCIPAL: CLARK COBERLY
PHONE: 468-2361**

PARENTAL TRANSPORTATION RELEASE

I, as Parent or Legal Guardian of _____
Student's Name

Desire to pick up my son/daughter after the scheduled athletic contest at

_____ **on** _____,
Name of school month-day-year

By signing this release and taking charge of my son/daughter at the specified time, date, and place, I understand that I hereby release the Weston County School District #7 and it's responsible official, _____

Coach/Sponsor

Of their responsibility and liability for the safe transport home of my son/daughter, and I do accept and assume such responsibility and liability.

Signature of Parent/Legal Guardian