



Owatonna Christian School  
265 26<sup>th</sup> Street NE  
Owatonna, MN 55060  
(507) 451-3495 (phone)  
(507) 451-3762 (fax)  
www.owatonnachristianschool.org

## Travel Release Form



This is to certify that \_\_\_\_\_ has my permission to ride (to/from/both) the  
Student name  
\_\_\_\_\_ event on \_\_\_/\_\_\_/\_\_\_ at \_\_\_\_\_  
Sport/Activity Date Location of event

**I certify that I am the legal guardian of the above named student. I hereby give my permission for the above named student:**

to ride with another person(s) other than their legal guardian.

Name of person driving \_\_\_\_\_

(must be at least 21 yrs. of age, and must not be a person of the opposite sex unless related).

Relationship to student \_\_\_\_\_

I am personally transporting the above named student.

**Students cannot drive themselves to or from any event.**

Signature of Parent/Guardian: \_\_\_\_\_ Phone Number \_\_\_\_-\_\_\_\_-\_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

I understand that Owatonna Christian School requires that students ride school scheduled and approved vehicles to and from all events. A departure from this requirement will be with the approval of the supervising coach/advisor and will release Owatonna Christian School from liability for any adverse results that may occur.

I agree to release Owatonna Christian School and its employees and officers from liability with reference to the above stated transportation.

Signature of Parent/Guardian: \_\_\_\_\_

Signature of Coach: \_\_\_\_\_

**Return this form with all required signatures to the school office.**