

**BARNEGAT HIGH SCHOOL
ATHLETIC DEPARTMENT
180 Bengal Blvd., Barnegat, NJ 08005
609-660-7510**

CONTEST TRAVEL RELEASE

SPORT _____

This is to certify that (Student Name) _____ has my permission

to ride (to-from-both) the athletic event on (Date) _____
(circle one)
at (Location) _____.

I certify that I am personally transporting the above-named student, or have arranged for transportation with (Name of Person Transporting Student) * _____, the adult (non-student) of my choice for this student.

The reason for not riding the bus is _____.

I understand that the Barnegat Township Athletic Rules require that students ride the buses to and from all athletic events and a departure from this requirement will release the Barnegat Township School District from all liability for any adverse results that may occur.

I agree to release the Barnegat Township School District and its employees and officers from all liability with reference to the above-stated transportation.

This form must be on file in the Athletic Office 24 HOURS PRIOR to the dismissal of school on the day of the contest.

Parent/Guardian Signature

Date

*Signature of adult authorized by parent/guardian to transport student

Director of Athletics Signature