

## **TEXAS CITY ISD**



## STUDENT TRAVEL RELEASE FORM

| Student's Sponsor/Coach's Name:  |                         |                       | ated: 9/18/202 |
|--|-------------------------|-----------------------|----------------|
| Organization or Team Name:   |                         |                       |                |
| My son/daughter,   |                         | , needs to use alt    | ernate         |
| travel from/to   |                         |                       |                |
|  | (Destination of trip)   |                       |                |
| with   | by                      | _ on                  |                |
| (Parent/Guardian's Name)   | (car, bus, etc.)        | (Date & Time)         |                |
| The reason for this alternate method of travel hereby release Texas City ISD and the sporthis alternate method of travel for this school | nsoring staff member(s) |                       |                |
| (Parent/Guardian Signature)  |                         | (Date)                |                |
| FORM MUST BE SIGNED SCHOOL AT LEAST 48 HOUR  | S PRIOR TO THE          | DAY OF THE EVEN       | T AND          |
| PRESENTED TO THE COAC  | II 30 ANNAINGE          | IVILIVIS CAIN DE IVIA | VDL.           |
| (Principal's Signature)  |                         | (Date)                |                |