

WARSAW BAND PARENT TRANSPORTATION PERMISSION FORM

I, _____, request that my student, _____,
(print parent or guardian name) (print student name)

be allowed to ride home with us following the _____
(name of event)

on _____. I understand that Warsaw Community Schools is no longer
(date of event)
responsible for their safety once they are released.

(parent/ guardian signature)

(date signed)