Lampasas Independent School District

Request for Post-Activity Student Release

Student's Last Name	First Name	Middle Name	Grade Level

As the parent/guardian of the above-named student, I understand that all students are required to ride to and from school-sponsored activities in District-provided transportation according to Athletic Policy. An exception may be granted for a student to be released to the custody of his/her parent at the completion of the activity if a written request is received and approved prior to the trip.

I am hereby requesting that approval be considered for my child to be released into my custody at the completion of the following activity:

Organization	Destination	Date of Trip
Reason for Request:		
Reason for Request.		

I understand that, if approval is granted, my child will only be released to me if I am present at the completion of the activity, otherwise he/she will be expected to ride on the District-provided transportation.

Parent/Guardian's Printed Name:	Telephone Number:
Parent/Guardian's Signature:	Date:

FOR SCHOOL USE ONLY

CIRCLE O	NE	SIGNATURE OF SPONSOR:	DATE:
APPROVED	DENIED		