

## Leggett Independent School District Request for Post-Activity Student Release

Student- athlete:	First Name	Last Name	Grade Le 6 7 8 9 10	
are required transportation custody of his received and I am hereby	t/guardian of the above- to ride to and from schoon. An exception may be s/her parent at the comp approved prior to the tri requesting that approval he completion of the follow	ol-sponsored activities in granted for a student to oletion of the activity if a p. be considered for my ch	n District-prov be released to a written reque	ided othe estis
Organization		Destination		Date of Trip
Reason for R	equest			
present at the the District-	I that, if approval is grance completion of the actiprovided transportation.		will be expected	d to ride on
Parent/Guardian's Printed Name Parent/Guardian's Signature			Telephone Number Date	
Signature	FOR	SCHOOL USE ONLY		
Approved Denied	Signature of Sponsor		Date	
Approved	Signature of Principal of	or Designee	Date	

of