



**BETHEL PARK HIGH SCHOOL**  
**309 CHURCH ROAD / BETHEL PARK, PA 15102**  
**PHONE 412-854-8548 / FAX 412-854-8753**

**Athletic Travel Release Form**

This is to certify that \_\_\_\_\_ (student's name) has my permission  
not to ride the bus home from the \_\_\_\_\_ (sport) athletic contest  
on \_\_\_\_\_ (date) from \_\_\_\_\_ (location of contest).

I certify that I \_\_\_\_\_ (name of parent/guardian) am personally  
transporting the above named student from this event.

The adult responsible for transportation must personally see the advisor or coach in charge when  
taking a student to an event prior to the event.

I understand that the Bethel Park School District's Athletic Rules requires a student to ride the  
busses to and from all athletic events and departure from this requirement will release the Bethel  
Park School District from all liability for any adverse results which may occur.

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

**This form must be signed by the Athletic Director/Principal and Head Coach prior to  
departure from Bethel Park. The head coach must retain this form.**

\_\_\_\_\_  
Signature of Parent /Guardian

\_\_\_\_\_  
Signature of Head Coach

\_\_\_\_\_  
Signature of Athletic Director/Principal