Socorro Independent School District Departments of Athletics and Fine Arts Travel Release Form

Date of Event:	-
Name of Event:	_
Location of Event:	-
I hereby request that my son/daughter	
Leave after the game/contest with legal guardian/parent.	
Be taken to the game/contest with legal guardian/parent.	
I understand that you will release my child ONLY to myself, the legal cus my son/daughter must obtain prior permission from both the coach/spons my child not to utilize school provided transportation.	
I understand that I am releasing Socorro Independent School District and for any accidents or injuries that may occur once my child is released into	1 ,
This form must include all signatures to be accepted and a new form com-	pleted for each and every event.
Coach/Sponsor:	Date:
Administrator:	Date:
Parent/Legal Guardian:	Date: