

New Milford High School Marching Band and Color Guard
TRAVEL RELEASE FORM

Return to Mr. Syzdek, Band Director
No later than 48 hours prior to departure

Date of submission: _____

This is to certify that _____ has my permission
Student's Name

to ride home with _____ from the Marching
* Name of parent or other responsible adult

Band/Color Guard trip on _____ at _____
** Date Location of Event

***If not the parent, this must be an adult relative or parent of another Marching Band/Color Guard member.**

****This form MUST be turned in at least 48 hours prior to departure.**

I certify that the above named driver is personally transporting the above named student. I understand that New Milford Public Schools rules require students ride the bus to and from all Marching Band/Color Guard events and a departure from this requirement will release the New Milford Public Schools from all liability for any adverse results that may occur. I agree to release the New Milford Public Schools and its employees and officers from all liability with reference to the above stated transportation.

I understand that I, or the person designated herein, must personally check out with a chaperone or Mr. Syzdek prior to leaving with my child.

Printed Name of Parent/Guardian

Signature of Parent/Guardian