

VIEWMONT HIGH SCHOOL

PARENT RELEASE STATEMENT FOR VEHICULAR TRAVEL PERMISSION AND RESPONSIBILITY

Parent Permission Statement: I accept all responsibility for the transportation of my student to and from all practices and contests for the 2021-22 school year, including cost of travel and any medical expenses which may occur due to illness or accident relating to this travel. I release Viewmont High School and Davis County School District from any liability which may be incurred because of vehicular accident related to this travel.

STUDENT'S NAME: _____

PARENT'S SIGNATURE: _____

DATE: _____