MERCER ISLAND HIGH SCHOOL

9100 SE 42nd ST Mercer Island, WA 98040-4107 T: 206-236-3359 F: 206-236-3358 www.mercerislandschools.org

Walter Kelly Principal Jeff Jones Associate Principal Lisa Deen Associate Principal Nick Wold Associate Principal



REQUEST FOR TRAVEL RELEASE OF ATHLETE

I request that my child	(or ward)	_ be released by the
Mercer Island School	District and school personnel in charge, to tra	vel with me rather
than the Transportation	n provided by the Mercer Island School Distr	ict. I understand that
school policy prohibits	s the releasing of a student to travel with anyo	ne other than a parent
or guardian. I accept f	full responsibility for this action.	
	Date of Event/Event Title	W
₽ ≥	Print: Parent or Guardian Name	6
	Parent/Guardian Signature	
2	Date of Parent/Guardian Signature	=
	Coach's Signature	-