

Andover Central Middle School

903 E. Central

Andover, Kansas 67002

Phone (316) 218-4710

Fax (316) 733-8563

Leslianne Craft, Principal Shanda Seibel, Assistant Principal

Request to Transport Athlete/Student from Site

To be completed by parent releasing their studen	it:
My child	has permission to ride home from
My child(student's name)	<u> </u>
	on
(event & location)	on(date)
with(parent name)	
(parent name)	
(Parent/Guardian Signature)	
To be completed by sometimes with for welling	material of home
To be completed by parent responsible for gettin	
Per parent permission above, I(parent name)	will be driving
	home after
(student's name)	
(event & location)	on (date)
(Parent Signature)	
Approved by	` '
(School Administrator)	(Date)