North Santiam School District

1155 N Third Avenue Stayton, Oregon 97383 (503) 769-6924 FAX (503) 769-3578

Web Site: www.nssd29j.org

Student Athlete
Transportation Permission Form

___Stayton High School **___Stayton Middle** **___Sublimity** **___Mari-Linn**

Sport/Activity: _____

Please Print

This form must be turned in to the office for verification at least (1) day prior to departure

I,_____, give permission for _____
Parent/Guardian Student Athlete Name

to ride with _____ to / from (circle)

_____, on _____
Location Date

By signing below, I agree to hold North Santiam School District, its officials, agents, and employees harmless against any claim for injury or damage occurring during this transport.

_____ _____
Parent/Guardian of Student Athlete- *Signature* Adult Transporting Student- *Signature*

_____ _____
Phone Number Phone Number

FOR OFFICE USE ONLY

_____
Signature of Employee Receiving Form Date

NORTH SANTIAM SCHOOLS…WE CHANGE KIDS' LIVES!

NSSD IS AN EQUAL OPPORTUNITY EMPLOYER