## **Hawk Athletics**



## Hendrickson High School Athletics PfISD

Ĭ,	, am requesting to take my
(Parent Name Printed)	, am requesting to take my
child;	from his/her athletic event
(Student/Athletes Name)	
at,	, and provide an nt Destination)
(Athletic Event or Eve	nt Destination)
alternate means of travel for my child th	nat does not include PFISD bus transportation. As
the parent/guardian, I understand I am	taking full responsibility for the transportation, or
assigned transportation of my child one	ce I submit this document.
The date of the event is://	
Parent Signature:	
Date:/	
Approval: Y N	
Team Coach or Campus Athletic Coordinate	or Signature:
Date://	

Note: 24 hour advance notice for approvals; unless it is an emergency situation.