

2026 2027 SPORTS TRAVELING PERMISSION SLIP

My student, _____ participates in the sport(s) of _____
Please print name of student

_____ and will be traveling home with: _____
Please print all sport(s)

What is the Reason athlete cannot travel home w/team:

- **STATE REASON BELOW** 

This must be approved by the Athletic Director, Mr. Yancey Devore 48 hours in advance.

Printed Name of Parent Contact phone/cell #

Signature of Parent Date

OFFICE USE ONLY:
Athletic Approval: _____

Date