PEWAUKEE PUBLIC SCHOOLS

ALTERNATE TRANSPORTATION PERMISSION FORM

This permission slip MUST be in the leaving for the activity.	ne hands of the Coach/Advisor BEFORE
I,Parent/Legal Guardian (Plea se Print)	, give my son/daughter,
Student's full name (Please Print)	permission to leave the school sponsored
activity at	On Date of Activity
with Name of Person Assuming Responsibility (Ple	. I hereby release the
Pewaukee School District of all liab	oility once this slip has been signed by the
person assuming responsibility note	ed above.
Signature of Parent/Legal Guardian	Date
** Do not pre-sign the line below. This the school sponsored activity, in the pre	will be signed just prior to the student leaving sence of the Advisor/Coach.
Signature of Person Assuming Responsibility DO NOT PRE-SIGN (To be signed at the time of assuming responsibility	