

WRPS Solo and Ensemble Transportation Release Form

Everyone MUST complete this form!

This is to certify elected transportation method for my child (student name PRINTED)

WRPS WILL provide transportation on the first SATURDAY in MARCH for the district Solo and Ensemble Festival to and from Marshfield High School in Marshfield, WI.

Please check which circumstance applies....

Bus

- My child will be taking the bus **TO and FROM** the festival. (Complete the bottom of this form and return)
- My child will be riding the bus **TO** **FROM** Marshfield High School. (Check appropriate box below, complete the bottom of this form and return)
- My child will NOT be riding the bus at all. (Check appropriate box below, complete the bottom of this form and return)

Student Driver

- I give my child permission to drive him/herself **TO** **FROM** Marshfield High School. My child understands that he/she must provide a copy of his/her drivers license and proof of insurance to their teacher by **Feb. 26th**. My child understands that he/she may take only 1 additional student in his/her vehicle.

Student riding with adult (own parent, or a friend's parent)

- My child will procure transportation **TO** **FROM** Marshfield High School with an ADULT (non-student) or PARENT driver.

Name of adult driver: _____

Student riding with another student

- My child may ride with another LHS student **TO** **FROM** Marshfield H.S.

Name of student driver: _____

Important!: You may NOT decide to alter the arrangements indicated above during the time of the festival. In other words, if you checked the box indicating that you are to travel from Marshfield with an adult, you may not go with another student instead.

This form is due to your teacher NO LATER THAN February 26th.

- I understand that the Lincoln H.S. activity rules require that the student ride the bus to and from the District Solo and Ensemble Festival at Marshfield High School on Saturday, March 3rd, 2018, and that departure from this requirement will release the Wisconsin Rapids Public School District from all liability for any adverse results that may occur.
- My student understands the responsibilities and acceptable behaviors of driving themselves and others.
- I agree to release the Wisconsin Rapids School District and it employees and officers from all liability with reference to the above stated transportation.
- This form must be on file in the main office 48 hours prior to the dismissal of school on the day of the event.

By signing below, you are agreeing to the above guidelines.

Parent name _____

Parent Signature _____ date _____

Emergency contact name and phone number _____