

ALTERNATE TRAVEL RELEASE

I, _____, PARENT OR GUARDIAN OF _____,
RELEASE THE WAUKESHA YOUTH FOOTBALL PROGRAM ADMINISTRATORS AND
COACHES FROM ALL LIABILITY AND RESPONSIBILITY OF PROVIDING
TRANSPORTATION HOME FROM THE AWAY FOOTBALL GAME FOR THE ABOVE
MENTIONED CHILD ON
_____, OR FOR THE ENTIRE 20__ SEASON.

I UNDERSTAND IT IS MY RESPONSIBILITY TO MAKE THE NECESSARY
ARRANGEMENTS FOR THE ABOVE CHILD'S RETURN TRANSPORTATION HOME.

SIGNED THIS DATE _____

PARENT/GUARDIAN _____

PRINT NAME _____