



Once a student-athlete leaves the custodial care of PGCPS, the school system no longer has any responsibility over the student.

Date: _____

I, _____, as the _____ of
Please Print Full Name parent/guardian

_____ give permission for him/her to return
Please Print Athlete Full Name

from the following away _____.
Please print event name.

They may be released to _____.
Please print the individual's name.

This individual is _____
Please print relationship to student athlete.

Will this be a one-time occurrence? Yes or No

Will this take place during the entire season? Yes or No

Parent/Guardian Signature: _____ Date: _____

Coaches' Name: _____ Date: _____

Coaches' Signature: _____

Athletic Director's Name: _____ Date: _____

Athletic Director's Signature: _____

Principal's Name: _____ Date: _____

Principal's Signature: _____