



To: Ray Shovlain, Athletic Director
FAX: 563 – 333 - 6239

From: _____

RE: Travel Release

Date: _____

My son/daughter, _____ will travel separately __to / from / both (circle one)__ the following road trip: _____ sport: _____

I understand that by choosing not to travel with the team in a school sponsored vehicle, the college's insurance will not cover my son/daughter during transportation __to / from / both (circle one)__ this contest.

Parent Signature _____ Date _____

Athlete Signature _____ Date _____

Please FAX this document to: 563 / 333 - 6239