



Milford Middle School Athletics

33 Osgood Road

Milford, NH 03055

(603) 673-5221 ext. 1535

Athletic Director – Don Gutterson

don.gutterson@milfordk12.org

Milford Middle School Athletic Transportation Release to Transport a Student

From an Athletic Event.

Gender, Division, Sport: _____

Date & Location of Event: _____

Riding Home with a Parent.

I certify that I, _____ am personally transporting my
(parent's name, printed)

son/daughter, _____, home after the athletic event listed above.
(child's name, printed)

Riding Home with a Teammate's Parent

I, _____ give permission for my son/daughter,
(parent's name, printed)

_____, to ride home with, _____
(child's name, printed) (name of parent for whom you are permitting your child to travel with)

Following the event listed above.

I understand that Milford Middle School rules require students to ride the bus to and from all athletic events. Departure from this requirement will release Milford Middle School and the Milford School District from all liability for any adverse result that may occur. By completing and signing this form, I agree to release Milford Middle School and the Milford School District and its employees and officers from any and all liability, with reference to the above stated transportation.

(Parent Signature) (Date)

**** Please submit this form to the Athletic Director 24 hours prior to the event.****

