

HOLMDEL TOWNSHIP SCHOOL DISTRICT

"A COMMITMENT TO EXCELLENCE"



Holmdel High School
William R. Satz Middle School
Crawfords Corner Road
Holmdel, NJ 07733
tel: 732-946-1843
fax: 732-946-8641

Travel Release

Date: _____

This form must be filed in the department or main office prior to school dismissal on the date of event.

This is to certify that _____ has my permission to
(Student's Name)

participate in _____ on
(Name of Event)

_____ at _____
(Date of Event) (Location)

.....
If the student is not using school supplied transportation, please complete the following:

I certify that I am personally transporting the above named student, or have arranged for transportation with an adult (non-student) of my choosing for this student.

The reason for not riding the bus is: _____

.....
I understand that the Holmdel Board of Education requires students to ride the bus to and from all school-sponsored activities and a departure from this procedure requires a parental release of liability.

Any private transportation to an event must be requested in writing, addressed to the staff in charge of the event, and approved prior to the dismissal of school on the day of the event. This form must be on file with the department sponsoring the event.

.....
Date: _____

Signature of Parent or Guardian

Approved

Not Approved

Signature of High School Administrator