STUDENTS STUDENT TRAVEL FMG (EXHIBIT C)

## ALTERNATIVE STUDENT TRAVEL FORM FOR SCHOOL SPONSORED EVENT

☐ Reoccurring Event	
☐ One-time Event	
Student Name	
Group	
Event/Destination	
Date of Event	
Transportation Method	
Driver's Name	
My child has permission to take the alternate travel for this alternative method of travel is	
I hereby release and hold harmless the Clear Creek employees, and agents from any and all liability in c travel for this school trip.	
Parent or Guardian Signature	Date
☐ APPROVED	
☐ DISAPPROVED	
Signature of Principal or designee	Date

• Student drivers-holding a valid driver's license **MAY NOT** transport any other student other than themselves.

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