

***PPB***

POINT PLEASANT BEACH HIGH SCHOOL  
Extra Curricular Activities  
700 TRENTON AVENUE  
PT. PLEASANT BEACH, NJ 08742  
Phone: 732-899-1817 Fax: 732-899-5638

**ACTIVITY TRAVEL RELEASE FORM**

DATE \_\_\_\_\_ ACTIVITY \_\_\_\_\_

This is to certify that I am personally transporting my son/daughter

\_\_\_\_\_ to and from the away events that the  
STUDENT'S NAME

\_\_\_\_\_ participates in.

EXTRA CURRICULAR ACTIVITY

This will be on an event-by-event bases. I will identify myself to the moderator of the extra curricular activity prior to taking my child.

I understand that the Point Pleasant Beach School District Extra Curricular Rules require that students ride the buses to and from all athletic events and a departure from this requirement will release the Point Pleasant Beach School District from all liability for any adverse results that may occur.

- ◆ I agree to release the Point Pleasant Beach School District and its employees and officers from all liability with reference to the above-stated transportation.
- ◆ This form must be kept on file in the office of the Supervisor of Extra Curricular Activities.
- ◆ Form must have all signatures on it before the student will be released.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Supervisor of Extra Curricular Activities

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Coach/Advisor Signature