



Athletic Department

Evanston Township High School, 1600 Dodge Avenue, Evanston, IL 60201
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847-424-7370 FAX: 847-492-5806

PARENTAL TRANSPORTATION RELEASE FORM

PARENT/GUARDIAN

I, _____, parent/guardian of _____,
am driving him/her from _____ after the competition on
____/____/20____.

I absolve and indemnify Evanston Township High School District 202 from any and all responsibility related to this travel.

Parent/Guardian PRINTED NAME

Parent/Guardian Signature

____/____/____
Date