

Waiver of Claims

Parent Request for Student Release to Parent Following Music Department Events

To the Administration of Yucca Valley High School:

Please release _____ to my/our custody following the Music
(print student name)

Department event on _____.
(date)

Name of adult completing this form _____
(print adult name)

Name of adult who will be responsible for the student _____
(print adult name)

***** ADULTS MUST BE ON THE STUDENT'S BLUE CARD. NO EXCEPTIONS! *****

In order to make an exception for this student, this request must be for a specific date and a valid reason.

Reason for request: _____

We hereby waive all claims against the Morongo Unified School District, its officers and employees, and the State of California, for any injury, accident, illness, death or property loss occurring during or by reason of his/her participation in this Music Department event.

(Parent Signature)

(Date)

(Administrator Signature)

(Date)

(Music Director)

(Date)

This form must be turned in at least 24 hours prior to the event