



Release from School for QR Sports

I _____ give permission for my child _____ to be picked up
Parent name *Child name*
from school or extended care on _____ by _____ for participation in athletics
Date *Coach / Parent name*
practice or game.

Following the event my child should:

___ Be brought to extended care (if before 5:55pm)

___ Be picked up by me at the game/practice

___ Other (please specify) _____

Parent Signature

Date



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