

DATE \_\_\_\_\_

**TRACY UNIFIED SCHOOL DISTRICT**  
(Emergency card for sudden illness or accident at school)

SPORT \_\_\_\_\_

PLEASE PRINT

STUDENT NAME \_\_\_\_\_

GRADE \_\_\_\_\_

HOME PHONE \_\_\_\_\_

BIRTH DATE \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

WORK PHONE \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

WORK PHONE \_\_\_\_\_

Relative or person to be notified if parent cannot be located: RELATIONSHIP TO STUDENT \_\_\_\_\_

NAME: \_\_\_\_\_

PHONE #:( \_\_\_\_\_ ) \_\_\_\_\_

Unless I send written notice of any change, I give permission to the Tracy Unified School District to take my child to Dr. \_\_\_\_\_ Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

or in the event that he cannot be located, permission is given to take my child to the hospital.

**PERMISSION TO PARTICIPATE IN ATHLETICS AND TRAVEL**

The \_\_\_\_\_ team of which your child is a member will be traveling on athletic trips as part of the regular schedule. On some trips if the squad is small, cars will be taken and be driven by a coach or a District approved adult over 21 years of age. When the squad is large, a school bus or charter bus will be taken. No athlete may drive themselves to or from athletic events.

In order for your child to make the trips, it will be necessary for us to have your approval. Please sign below and return to us.

DATE \_\_\_\_\_

SIGNED (Parent or Guardian) \_\_\_\_\_

**TRACY UNIFIED SCHOOL DISTRICT**  
**RELEASE FROM USE OF DISTRICT VEHICLE**

PLEASE PRINT

I, \_\_\_\_\_, give permission for my student \_\_\_\_\_ to ride with the following driver(s) listed below to the following school sponsored event(s). This form **MUST** be returned into the principals office prior to trip departure.

**Parent Signature:** \_\_\_\_\_

Each parent agrees to defend, indemnify, and save harmless the District, its officers, members of the Governing Boards, agents, employees, each jointly and separately, from and against any and all liabilities, demands, claims, damages, losses and expenses of any nature whatsoever, including without limitation, whether for injuries to persons or loss of life or damage to property during the transportation of students.

Authorized Drivers

Date of Event

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_