



Columbia-Brazoria Independent School District

P.O. Box 158, West Columbia, TX 77486 ★ 979-345-5147 ★ fax 979-345-4890 ★ www.cbisd.com

STUDENT TRAVEL RELEASE

My son/daughter, _____, needs to return

From _____
(Destination of trip)

with _____ by _____ at _____.
(Parent's name) (car,bus,etc.) (Departure time)

The reason for this alternate method of travel is _____
_____.

I hereby release CBISD and the sponsoring staff member(s) _____

from all liability in connection with this alternate method of travel for this school trip.

(Parent/Guardian Signature)

(Date)

MUST BE SIGNED BY PRINCIPAL 24 HOURS PRIOR TO THE DAY OF THE EVENT.

PRINCIPAL'S SIGNATURE

DATE

Catch the Challenge !

Learn for Life !
With Us !

Come Grow