

Gonzales High School

Alternate Student Travel for School Events

My son/daughter, _____, needs to go to and/or return
from _____ with _____.
Destination of trip parent name

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

I hereby release and hold harmless the Gonzales Independent School District, it's
Trustees, employees and agents from any and all liability in connection with this alternate
method of travel.

Parent/Guardian Signature

Date

() Approved

Signature of Principal or Designee

() Disapproved

Date