

Elko High School Athletic Department

Elko, Nevada

Phone (775)738-7281

Fax (775) 738-9616

| | is/are in the custody of t | he Elko County School District | t and its |
|---|-------------------------------|--------------------------------|--------------------------------------|
| Name(s) | | | |
| Employees on a trip for a s | chool-sponsored activity, n | amely | |
| inin | | on | |
| Name/ and Activity | Location | Date | |
| We, the parents of | | , request the District re | elease |
| my/(our) child/student to t | the custody of | | · |
| At the time of such release this/(these) student(s) | e, the District shall have no | further custody, care, respons | ibility or liability with respect to |
| Signature of Parent(s) | | Date | |
| | | Date | |
| STATE OF NEVADA)) ss. COUNTY OF ELKO) | | | |
| Subscribed and sworn befo | ore me thisday | of | , 202 |
| Ву | · | | |
| Notary Public | | | |
| APPROVAL BY A | DMINISTRATION | | |
| Signature | | Date | |