



# Student/District-Related Activity Student Release Form

**“Proud Home of the Timberwolves”**

**School/District-Related Activity:** \_\_\_\_\_

I, \_\_\_\_\_, am the parent/guardian of \_\_\_\_\_.  
I understand that I am asking for a special exception to remove my student from this school-related activity. I understand that I am assuming full responsibility for my student. I agree to protect, indemnify, and hold harmless the Everett School District, its elected and appointed officials, employees, agents, and staff for any and all claims or loss incurred from the time and date listed below until my student returns to school or to a school/district-related activity.

\_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_  
Time Date Location

**Administrator granting approval:**

☐ Mr. Balla    ☐ Ms. Stoddard    ☐ Mr. Tower    ☐ Ms. Renee

\_\_\_\_\_  
Student Name (printed) & School ID

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Name (printed)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Coordinating Staff Member Name (printed)

\_\_\_\_\_  
Coordinating Staff Member Staff Signature

EXPLANATION/RATIONALE:

*This form is to remain in the possession of the coordinating staff member as part of the field trip documentation*