

**School District of La Crosse Co-Curricular Transportation Decline Form**

I \_\_\_\_\_ will decline district provided co-curricular  
(Name of Parent/Guardian)

transportation for \_\_\_\_\_ on \_\_\_\_\_  
(Name of Student) (Date of Event)

*The sole purpose of this form is to allow parents to decline transportation provided by the School District of La Crosse for Co-curricular events. In no way does this form signify approval of alternate transportation. Once this form is signed the School District of La Crosse is released from liability and supervision of the above named student.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(Original to Coach/Advisor)**

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