



STUDENT-ATHLETE TEAM TRAVEL WAIVER

This letter is to inform you that (student athlete) _____
is unable to travel with the (sport) _____ team at the
competition of the following contest:

Game Day/Date: _____
Time of Contest: _____
Opponent: _____
Reason for Leaving: _____

By signing this waiver form we hereby release Bridgewater State University from any and all liability for any injuries and illnesses incurred during the time that said student-athlete is not supervised by an official member of the Bridgewater State University athletic staff.

Signature

Date

Student Athlete _____

Parent/Guardian _____

Coach _____
