



Parent/Student Permission Form (Travel)

Date: _____

Name of Student: _____

Name of Parent: _____

Activity: _____

Sponsor/Director/Coach: _____

My child will be leaving with me/us after the above event for the following reason:

Parent Signature: _____

Red Oak Community Schools Dean of Students & Activities Director
2011 North 8th Street Red Oak IA 51566

Angie Spangenberg - Dean
712-623-6610 ext. 5001

Fax - 623-6613

Trisha Earley - Secretary
623-6610 ext. 5002



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