



# Alternate Travel Release Form

I, \_\_\_\_\_, hereby allow my son/daughter  
\_\_\_\_\_ to travel separately from the CRI group  
and the transportation organized and provided by Community Rowing, Inc.

I understand that by doing so, my child will no longer be covered under Community Rowing, Inc. insurance for the specified alternative portion of the trip, and will therefore no longer be a Community Rowing, Inc. liability for that portion.

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

**Alternate travel information:** Fill out **Travel to** and/or **Return from** below as needed.

**Travel to:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
NAME OF EVENT

Name of person providing alternate transportation: \_\_\_\_\_

**Return from:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
NAME OF EVENT

Name of person providing alternate transportation: \_\_\_\_\_

*Note: Athletes under the age of 18 are not permitted to drive to or from events for which Community Rowing, Inc. provides transportation.*