



2024-2025 SCHOOL YEAR
PLEASE COMPLETE ONE PER FAMILY.

Definition: Any upper school student who participates in an activity outside of Liberty Tree Academy that requires said student to leave school early.

Student Name: _____

Grade: _____

Activity Student is Attending: _____

School District: _____

Days this Waiver Applies: M T W TH F

Date Range: _____

Time Student is Expected to Leave: _____

Comments/Exclusions/Explanations: _____

As required by LTA, I/we _____
(please print name) hereby grant my/our child(ren) as named above, permission to leave the school premises at the above listed times without adult supervision on the days indicated above. We, the undersigned, agree to and accept full responsibility for my/our student's dismissal from school. I/We release LTA once my/our student(s) is/are released from school property.

Parent/Guardian Signature(s): _____

Parent Cell Phone: _____

Parent Email: _____

Instructions for Submission: This form must be returned to the school office for approval before a student may leave campus unsupervised. Print and sign this form and either drop it off at the front office or send it in with your child.

OFFICE USE ONLY

Date Received: _____