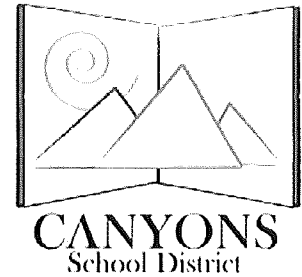


ACTIVITY AUTHORIZATION FORM
CANYONS SCHOOL DISTRICT



Student Name: _____ Date: _____

Grade: _____ Cellphone #: _____

Name of Activity: _____

Date of Activity: _____

Time: From _____ To _____

Activity

Location/Address:

Special Instructions:

Transportation:

☒ Has no transportation option available (parent/guardian responsibility)

Parent/Guardian Authorization:

I authorize my student to participate in the activity identified above. I recognize that I have full responsibility for my student during the time he/she is off a public school site including the transportation to and from the activity.

Name of Parent/Guardian (Please Print)

Parent/Guardian Address

Signature of Parent/Guardian

Date

Emergency Phone Number



No District employee or student shall be subjected to discrimination in employment or any District program or activity on the basis of age, color, disability, gender, gender identity, national origin, pregnancy, race, religion, sexual orientation, or veteran status. Canyons School District is committed to providing equal access and equal opportunity in its programs, services and employment including its policies, complaint processes, program accessibility, District facility use, accommodations and other Equal Employment Opportunity matters. The following person has been designated to handle inquiries and complaints regarding unlawful discrimination, harassment, and retaliation:

Jeffrey Christensen, Assistant Legal Counsel

Compliance Officer
9361 South 300 East Sandy, UT 84070
801.826.5061

You may also contact: The Office for Civil Rights, Denver, CO, (303) 844-5695.