

**LESA AVIATION ACADEMY**  
**Parental Authorization and Release from Liability**  
**Transportation and Participation for School-Sponsored Activity**  
**2022-2023 School Year**

Name of Student: \_\_\_\_\_ Grade \_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

Address: \_\_\_\_\_

Parent Daytime Phone #: \_\_\_\_\_ Name: \_\_\_\_\_

I hereby authorize my above-named child to participate in all Aviation Academy/Pilot Ground School activities and be transported by an authorized vehicle provided through LESA if required for an activity that takes place at a location other than Livingston County Airport or a Howell School Facility.

The right to leave school property for a school-sponsored activity is a privilege and may be suspended or revoked if a student violates any Board of Education policies, provisions of the LESA Student code of conduct, or State or local laws, including traffic rules and regulations, while s-he is on or off school property. All provisions of the LESA Student Code of Conduct and Board of Education policies shall be in effect while the student is off school property and participating in the school-sponsored activity, and the student is expected to comply with all such rules and regulations. Violations of such rules and/or regulations may result in appropriate disciplinary action.

By signing below, we (parent/s and student) affirm that we (parent/s and student) have read and understand this entire document. We (parent/s and student) agree to the terms and conditions set forth herein regarding my/our child's participation in all Aviation Academy/Pilot Ground School activities. Additionally, the signatures below indicate that if there are any questions concerning any activity and/or this document, they have been asked and the questions have been addressed. We acknowledge having had an opportunity to review the document with a representative of our choosing.

---

Parent/s Name – Print

---

Student Name – Print

---

Parent/s Signature

---

Date

---

Student Signature

---

Date