

**VERNON COLLEGE**  
**STUDENT TRAVEL RELEASE FORM**

I \_\_\_\_\_ have read and understand the Student Travel Policy. I also understand that I am responsible for my own behavior and will abide by all rules and regulations outlined in the *Vernon College Student Handbook*. I understand that if I am in violation of any of these rules I will be subject to the consequences stated in the Handbook. In addition, the following stipulations will apply:

\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please fill in the following information below:**

Local address: \_\_\_\_\_

Local phone number: \_\_\_\_\_

Parent's phone number: \_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone number: \_\_\_\_\_

Medical conditions: \_\_\_\_\_