

Crook County School District
Parent/Legal Guardian Permission & Liability Release Form
Student Transportation Via Private Vehicle Other Than Parent/Guardian

Student Name (“Student”):

Grade:

Address:

Parent(s)/Legal Guardian(s) Name(s):

Parent/Legal Guardian Phone Number:

Authorized Driver:

As the parent/legal guardian of Student, I do hereby grant my permission for Student to ride as a passenger in a privately-owned vehicle driven by Authorized Driver from the Sport or Activity listed below to the Destination listed below:

Sport or Activity:

Date of Sport or Activity:

Location of Sport or Activity:

Destination:

Authorized Driver is responsible for having a valid license to drive the privately-owned vehicle, having proof of insurance, operating the privately-owned vehicle in a safe manner, and maintaining the privately-owned vehicle in a safe working condition. Crook County School District (the “School District”) makes no representations regarding Authorized Driver or any privately-owned vehicle operated by Authorized Driver.

Student and I understand that Student may be at greater risk of injury if being transported as a passenger in a privately-owned vehicle instead of a School District vehicle, and such risk is assumed by the undersigned. Student and I understand and acknowledge that the School District does not insure students for damages arising from the operation of any privately-owned motor vehicle, including physical injuries and other damages from accidents involving motor vehicles, regardless of the driver of the privately-owned vehicle. Student and I understand and acknowledge that Authorized Driver is not transporting Student as an officer, agent, employee, or volunteer of the School District.

In consideration for providing Student the opportunity to participate in the Sport or Activity, both Student and I voluntarily agree to waive and discharge any and all claims against the School District, including its officers, agents, employees, and volunteers, arising from Authorized Driver’s transportation of Student from the Sport or Activity listed above.

This Agreement is intended to be as broad and inclusive as is permitted by law. If any provision or any part of any provision of this Agreement is held to be invalid or legally unenforceable for any reason, the remainder of this Agreement shall not be affected thereby and shall remain valid and fully enforceable.

I certify that I have read this document in its entirety and fully understand its contents.

Parent/Legal Guardian Signature

Date

Student Signature (if over 18)

Date