

Health Science Technology Education

Release of Liability for Travel for School-Sponsored Trips

Travel Release

I desire that my son/daughter be allowed to travel to and from school-sponsored events during this school year and to participate in school-sponsored events. I fully understand and my son/daughter fully understands that participation in and transportation to and from the school-sponsored events could create risk to the health or safety of my son/daughter. I, the undersigned, assume full and complete responsibility for any injury or accident that may occur to my son/daughter in his/her travel to and from and participation in the school-sponsored activities. In consideration of the _____ School District's allowing my child to participate in the school-sponsored activities and other good and valuable consideration, the receipt of which is acknowledged, I hereby release and waive all claims that I or my son/daughter may have against the _____ School District, its Board of Trustees, employees, agents, and representatives and all participating health care agencies resulting, in whole or part, from my son/daughter traveling to and from the events attended by the school-sponsored group or from my son/daughter participating in the activities of the school-sponsored group. The release and waiver shall be binding on my heirs, legatees, administrators, and assigns.

Signature of Parent or Legal Guardian

Date

Signature of Student

Date

- * Student Medical/Emergency Information Card must be on file in the school office.
- * Student must obey all traffic regulations and the rules of the school regarding driving and parking vehicles.