Transport	ation Waiver Release Form
Student Name:(Last Name)	
	(* Het Halle)
Program/Class:	Instructor:
Program Activity:	
Location:	
	School Transportation: Yes No
¥	en parent/legal guardian initial here:, and
Auto Insurance Company & Policy#	
	Estimated Return Time:
decision to travel is of free will and with parental conswith parent/guardian, we hereby release the Board of employees and agents in both their official and ind demands for personal injury, accidental injury, sickness	named student hereby give consent for the above-named student to avel with the parent/guardian. This is with an understanding this ent. In consideration of the agreement to permit the student to travel Education for Northwest Local School District, its officers, members, lividual capacities (collectively the "Board") from and all liability or ess or death, as well as property damage expenses of any nature d and the student-participant while said student is participating in the
The undersigned further agrees to hold harmless and for any liability sustained by said Board as a result of t	indemnify said Board, its officers, members, employees and agents the negligent, willful or intentional acts of the student.
If the student requires emergency treatment as a rest participating in the above program, such treatment is t Form previously provided by is to the Board of Educati	ult of an accident or event that occurs while traveling to and from or to be provided, consistent with the Emergency Medical Authorization ion for the student.
We further understand, consent and agree that the members, employees and agents including the Activity	Board of Education of Northwest Local School District, its officers, Advisor will not be held responsible for the results or treatment.
PRINT Parent/Guardian NAME	Date
Signature of Parent/Guardian	
	Maria Di
Home Phone:	
Alternate Emergency Contact: (PRIN	Phone #
Address	Work Phone #
I understand that the school discipline code will be enforules and to act in a reasonable manner – one that will	orced during the Field Trip reference above. I agree to follow the

Student Signature

Northwest Local School District PARENT/GUARDIAN EXTRA-CURRICULAR ACTIVITY TRANSPORTATION FORM

Printed Name of Student	Printed Name of Parent/Guardian
Printed Name of Activity/Team	Printed Name of School
I am the parent or guardian of the stude participate in the extracurricular activity i	nt identified above. I wish for my student to identified above.
(hereafter "events") may be conducted a understand that in certain circumstances to and from these events. In requesting	her activities for this extracurricular activity at a location away from my student's campus. It is, the School District may provide transportation that my student be permitted to participate in my student will ride in School District-provided equires my student to do so.
transportation for these events. In reque participate in this extracurricular activity, School District will not provide transporta	nstances, the School District may not provide esting that my student be permitted to I agree that in those circumstances where the ation to such events, I assume full responsibility for arranging transportation of my student to
for which the School District does not pro- instead allow my student to drive home of or to ride in a vehicle driven by another s parent or guardian. I acknowledge that to to allow my student to drive to or from a	nally transport my student to and from an event ovide transportation, any decision I make to or herself, to be transported by another person, student, it is solely in exercise of discretion as a the assessment and decision whether it is safe particular event or to ride with another person personal decision to be make by me and my
agree that no person driving my student is not providing transportation shall be co	to participate in this extracurricular activity, I to or from an event for which the School District onsidered an agent or servant of the School e, while driving my student to or from such an
Parent	Student
	(If student is at least 18 years old)
Date Signed:	Date Signed:

Original to be filed with Principal/designee prior to any off-campus travel. Copy to teacher or sponsor of extracurricular activity.