

RELEASE AND WAIVER OF CLAIMS WITH ASSUMPTION OF THE RISK AND INDEMNIFICATION RELATED TO TRANSPORTATION BY PRIVATE VEHICLE

Date and Time of Trip: _____

Reason for Transportation: _____

The following student(s), _____, will be transported from _____ to _____ by _____

Vehicle Description

Make, Model and Year: _____

License Tag Number: _____ Insurance Coverage/Carrier: _____

The undersigned hereby:

1. Releases, and agrees to hold harmless and indemnify the Jackson City School District Board of Education, its individual members, employees, administrators, and/or agents, any volunteer, and the driver from any and all liability, arising from negligence or otherwise, and damages, as a result of the undersigned's agreement to private vehicle transportation, including, but not limited to, property loss or damage, bodily, personal or mental injury, including death, and/or any other injury; and
1. Acknowledges and understands that it is the sole responsibility of the undersigned to evaluate carefully the risks that are inherent in such participation, including, without limitation, dangers posed by the willful or negligent conduct of others, and voluntarily assumes full responsibility for, and full risk of, property loss or damage, bodily, personal, or mental injury, including death, and/or any other injury relating to this transportation.

The undersigned has read the above carefully, understands its significance, and voluntarily agrees to all of these terms.

Signature of Student

Date

Printed Name

Signature of Parent/Legal Guardian

Date

Printed Name

Note: This Release must be properly executed and submitted to _____ before the student may be transported as described above.