Car Transportation Waiver SAMPLE

Church Address and Phone Number Contact Name and Number for event:

Dates of effective waiver:

Sample: Academic year 2021-2022

Stud	ent	Inform	ation
	U :		

Student Name	DOB //
Primary Phone	_Alternate Phone
Guardian Name	
Primary Phone	_Alternate Phone
n Case of Emergency Call (in	order listed):
1. Name	Relationship Phone

I give permission for my child/charge to be transported in a motor vehicle driven by the above referenced driver(s) to an event at the specified location on the date indicated.

I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and is expected to follow the directions provided by the drivers and/or other adult volunteers. I understand that participation in the identified event is not required.

I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to sit in the back seat in their seat with safety belt while traveling;
- (2) They are expected to respect each other, the vehicles they ride in, and the people they are traveling with during the trip.
- (3) Riding in a motor vehicle may result in personal injuries or death from wrecks, collisions or acts by riders, other drivers, or objects; and
- (4) They are to remain in their seats and not be disruptive to the driver of the vehicles.

I recognize that by participating in this activity, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of an accident, illness or other incapacity; regardless of weather I have authorized such expenses. As a condition for the transportation received, I, for myself, my child, my executors and assigns further agree to release and forever discharge <Insert Church Name> and their employees and volunteers from any claim that I might have myself or that I could bring on my child's behalf with regard to any damages, demands or actions whatsoever, including those based on negligence, in any manner arising out of this transportation. I have read this entire waiver and permission form, fully understand it, and agree to be legally bound by its terms.

Parent/Guardian Name (please print):
Parent/Guardian Signature:
Date: