



**STUDENT TRANSPORTATION PERMISSION FORM (8411F)**

***This form is to be used when a parent requests transportation for their child with someone other than the parent/guardian.***

1. \_\_\_\_\_ has my permission to be transported by \_\_\_\_\_ to participate in \_\_\_\_\_ trip/event for which the school district may or may not be providing transportation. I fully understand that these arrangements must be made in advance and require administrative and coach, advisor or teacher, etc. approval.

2. In the event that I or another parent/guardian do not attend this trip/event and my child appears to need medical or dental care or treatment during this trip/event, and I or another parent/guardian cannot be reached after attempts to make telephone contact with me, I designate the following person to authorize medical or dental care or treatment: \_\_\_\_\_ (name of specific person designated). In the event the designated person is unavailable, I designate any adult supervising or chaperoning the trip/event.

3. My child and I agree to the following: *(check all that apply)*

- \_\_\_\_\_ He/she will ride to the trip/event with this person only.
- \_\_\_\_\_ He/she will ride from the trip/event with this person only.
- \_\_\_\_\_ He/she will return directly to the Academy or home (*circle one*) at the end of the trip/event.
- \_\_\_\_\_ He/she has permission to ride from each trip/event with this person only, for the \_\_\_\_\_ sports season. *(name of sport)*

**I, the parent/legal guardian, understand and agree that the school district has no responsibility for damage or loss of property brought by the student on the trip/event or obtained during the trip/event. I (and student if age 18 or older) also assume the risks of transportation to and from the trip/event and of participating in the trip/event and WAIVE AND RELEASE the Canandaigua City School District, its Board members, officers, employees, agents, and volunteers (including chaperones) from any and all liability for injuries or damages arising from participation in the trip/event, including travel to and from the trip/event as well as any activity at the site of the trip/event, except in the event.**

\_\_\_\_\_  
Parent's/Legal Guardian's Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Print Name of Parent/Legal Guardian

\_\_\_\_\_ Date \_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_ Date \_\_\_\_\_  
Administrator

\_\_\_\_\_ Date \_\_\_\_\_  
Coach, Advisor, Teacher

To be completed by the driver:

I have read the entire permission form. I understand and agree to transport this student to the trip/event described above and/or to return the student to the Academy/home at the end of the trip/event.

I agree and understand that I am **not** acting as an agent or volunteer of the district, and that I am solely responsible for the student rider in the case of an accident. I have a car insurance policy covering the vehicle that I will be using that provides at least the required statutory amount of liability coverage.

I agree to the following conditions:

Outside of my own family members,

- I will drive only those students who have this permission form fully executed to the trip/event.
- I will drive the student from the Academy to the trip/event site and back to the Academy or home (*circle one*) after the trip/event.
- I will obey all laws including, but not limited to, all Vehicle and Traffic laws while I am providing transportation to and from the trip/event.

\_\_\_\_\_ Date \_\_\_\_\_  
Driver's Signature

\_\_\_\_\_  
Print Name of Driver

Once completed, return the form to the supervisor of the event (i.e., coach, teacher, advisor, etc.).