Fulton County School Transportation Release

Since your student will be transported between school sites, events, activities during and after the school day, please complete and sign the following form, and return it to your coach.

___ I wish for my student to be transported by Fulton County bus transportation ONLY.

___ I wish to designate additional person(s) who may transport my student (see below).

I agree to hold Fulton County Board of Education harmless in the event of injury to _____ _____ (student's name), including any property damage while the student is driving or being driven to or from a school site and/or to school-related events, activities, or sites after school hours in a vehicle other than that provided by Fulton County Board of Education.

In addition, I agree not to assert against the Fulton County Board of Education, all current, former and future members of the School Board of the Fulton County Board of Education, all current, former and future employees and/or volunteers of the Fulton County Board of Education, and their heirs, executors, administrators, successors, and assigns, in any court of law, any claim or claims that the student and/or parent or legal guardian had, now have, or may have in the future, whether known or unknown, based on any injuries sustained by the student while being so transported.

I have read the above agreement, and voluntarily sign the release and waiver of liability, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

Signature of Parent or Legal Guardian: _____Date:_____

Signature of Student Athlete: _____Date:_____

Designated Driver (if applicable): All designated drivers must be over 18 years of age or an immediate family relative.

(Student's Name) _____has my permission to be transported to and from school sites during the school day and/or to school-related events, activities, or sites after school hours as a participant on the Northview High School Football Team. Either I or my designated driver, _____ , will be transporting the student to and/or from the event or activity. Either I or my designated driver will present himself or herself to the head coach and/or assistant coach after the event or activity has been completed in order to verify the intent to transport the above mentioned student.

Signature of Parent or Legal Guardian:_____Date:_____

Signature of Student Athlete: _____Date:_ _____

Signature of Designated Driver:_____ Date:_____

(FOR SCHOOL USE ONLY)

Received by : _____on _____
(print full name) (print date)

Signature of receiving party: _____

PRIOR TO PARTICIPATION IN ANY CONDITIONING, TRYOUT, PRACTICE SESSION, OR PLAY IN ANY INTERSCHOLASTIC ATHLETIC ACTIVITY, THE STUDENT ATHLETE MUST SUBMIT THIS FORM TO THE COACH OF THE ACTIVITY. FAILURE TO SUBMIT THIS FORM WILL DELAY THE ELIGIBILITY OF THE STUDENT-ATHLETE TO JOIN THE TEAM.