

Student Athlete Driver's Form

Name of student (Please print clearly): _____

Driver's License Number: _____

Activity/Athletic Events the student may drive to and from: _____

I, _____, hereby affirm that my child/ward has my authorization to drive themselves to and from the above stated events. We agree that this is a privilege that may be revoked by the principal/designee at any time. We also agree that my child/ward shall not have any other person under the age of 23 in the car with them, unless the student passenger has a Student Athlete Passenger form approved and on-file with the principal/designee.

The district does not provide any form of insurance for student drivers. The parent/guardian further acknowledges that they are legally responsible for the acts and omissions of above reference student driver and maybe liable for any claim related there too.

I HAVE READ AND HERBY CERTIFY THAT THE ABOVE-LISTED INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I FUTHER AGREE TO THE TERMS AND CONDITIONS LISTED ON THIS PERMISSION SLIP.

Parent/guardian signature: _____ Printed Name: _____

Student driver signature: _____ Printed Name: _____

Date signed: _____

Student Passenger Form

Name of student passenger: _____

Name/relation to student driver: _____

Activity/Athletic Events the student will be a passenger in a automobile driven by a student athlete: _____

I, _____, hereby affirm that my child/ward has my authorization to be a passenger in the above named student athlete's vehicle. We agree that this is a privilege that may be revoked by the school principal/designee at any time.

The district does not provide any form of insurance for student drivers. The parent/guardian further acknowledges that they are legally responsible for the acts and omissions of above reference student driver and maybe liable for any claim related there too.

I HAVE READ AND HERBY CERTIFY THAT THE ABOVE-LISTED INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I FUTHER AGREE TO THE TERMS AND CONDITIONS LISTED ON THIS PERMISSION SLIP.

Parent/guardian signature: _____

Parent/guardian name (please print): _____

Date signed: _____