

LAKE PLACID MIDDLE/HIGH SCHOOL

PARENT OR LEGAL GUARDIAN CONSENT AND WAIVER FOR PRIVATE VEHICLE TRANSPORTATION

Name of Parent(s) or Legal Guardian(s): _____
(Print legibly)

Address: _____

Home Phone: _____ Business/Cell Phone: _____

Name of Student: _____
(Print legibly)

Activity: _____

Activity Destination: _____

I understand that the Lake Placid Central School District (hereinafter the "District") is not providing bus or other transportation to and from this activity but that transportation will be provided by private vehicle not under the control or direction of the District. I consent to such.

I fully understand that neither the District nor any of its employees is in any way responsible, nor does the District or any of its employees assume liability for any injuries or losses resulting from my child riding as a passenger in a private vehicle or if my child is driving a vehicle provided by me.

I am accepting full responsibility for any form of injury or property damage, which may occur while my child is riding as a passenger in a private vehicle or driving themselves to or from _____.

I hereby release and hold harmless the Lake Placid Central School District from any liability whatsoever for my child's use of non-district transportation and waive any claim against the District.

I also understand that the driver of the vehicle in which my child is riding as a passenger, is not driving as an agent of or on behalf of the District, and the District has not confirmed liability insurance coverage, driver's license status or the condition of the vehicle in which my child will be riding.

Parent(s) or Guardian(s) Signatures: _____

Date: _____

Approved 12/28/2012