

BAYFIELD SCHOOL DISTRICT
SCHOOL TRANSPORTATION WAIVER FORM

I acknowledge that the Bayfield School District provides transportation for students to travel to/from eligible events. However, I wish and hereby accept responsibility for the transportation of my child to and/or from (circle one/both) the following event:

Event	Date	Location
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In so doing, I recognize and acknowledge the following:

1. That the School District of Bayfield ("District") will not be providing supervision of my child while traveling.
2. That neither I, my child, nor any party is an agent of the District for this transportation.
3. That the District, District officials, and District personnel are not in any way liable or responsible for my child while driving or riding in non-school provided transportation.
4. That I am fully responsible for my own actions in connection with the transportation of my child.
5. That there is no school liability insurance, property insurance or school vehicle insurance coverage for my child for this alternative to the school transportation that I am hereby choosing.

Accordingly, I, the undersigned, have read the foregoing and agree to and accept its contents, and hereby expressly waive and release any and all rights or claims of any nature whatsoever arising out of, in connection with, or resulting from, the above-cited event.

Student's Name

Address

Phone Number

Parent/Guardian Name

Parent/Guardian Signature

Date

Administrator's Signature

Date

A student will not be excused from riding District transportation until this form is completed, approved, and signed by a District representative.

ADOPTED: 03-09-09