

ATHLETICS TRANSPORTATION RELEASE FORM

This is to certify that _____ has my
(Student's name)

Permission to ride (to – from – both) the _____
(Athletic contest)

At _____ on _____.
(Location) (Date)

I certify that I am personally transporting the above-named dependent of mine.

The reason for not riding the bus is _____
_____.

I understand that Buford City Schools' athletic rules require that students ride the buses to and from all athletic events and a departure from this requirement will release Buford City School's from all liability for any adverse results that may occur.

I agree to release Buford City Schools and its employees and officers from all liability with reference to the above-stated transportation. Furthermore, please be advised that by electing to provide your own transportation to and from athletic events that you may not be entitled to insurance coverage provided by the school, which is customarily associated with the use of school vehicles and sponsored transportation (e.g. catastrophic coverage). You should contact your own insurance carrier to ascertain if you have the insurance coverage you desire.

This form must be on file in the athletic office prior to dismissal of school on the day of the contest.

Signature of Parent/Guardian

Date