

TRANSPORTATION LIABILITY WAIVER

I HAVE READ THE ATHLETIC/EXTRA-CURRICULAR TRANSPORTATION POLICY AND AGREE THAT THE SCHOOL SHALL ASSUME NO LIABILITY FOR INJURIES RESULTING FROM THE FOLLOWING SITUATIONS:

- Where I transport my son/daughter to or from an activity;
- Where I transport other students to or from an activity;
- Where I, as a parent/guardian, give permission to another adult to transport my son/daughter home from an activity, I have explained to the designated individual that s/he will assume all liability;
- Where I, as a parent/guardian, give permission to my son or daughter to transport themselves to or from an activity.

IN CONSIDERATION FOR DECLINING DISTRICT TRANSPORTATION, I HEREBY RELEASE AND FULLY DISCHARGE THE FULLY AND FOREVER DISCHARGE AND RELEASE THE DISTRICT, ITS OFFICERS, INSURERS, ATTORNEYS, AGENTS, BOARD MEMBERS, EMPLOYEES, REPRESENTATIVES, OR OTHER PERSONS ACTING FOR OR ON BEHALF OF THE DISTRICT, FROM ANY AND ALL CLAIMS, COMPENSATIONS, COSTS, EXPENSES, ATTORNEYS' FEES, CAUSES OF ACTION, DAMAGES (INCLUDING BUT NOT LIMITED TO PUNITIVE DAMAGES), DEMANDS, OR CAUSES OF ACTION, KNOWN OR UNKNOWN, ARISING OUT OF, RESULTING FROM, OR IN CONJUNCTION WITH OR RELATING TO MY SON/DAUGHTER PARTICIPATING IN THIS ACTIVITY, BUT NOT INCLUDING INJURIES THAT RESULT FROM THE NEGLIGENCE OF SCHOOL STAFF. I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS PERMISSION FORM WHICH CONTAINS A WAIVER OF RIGHT TO SUE THE DISTRICT AND UNDERSTAND ITS CONTENTS AND CONSEQUENCES AND THAT I AM SIGNING THIS AGREEMENT KNOWINGLY AND ACKNOWLEDGE THAT I HAVE NOT RELIED ON ANY REPRESENTATIONS, PROMISES, OR AGREEMENT OF ANY KIND IN CONNECTION WITH MY DECISION TO SIGN THIS DOCUMENT. THIS WAIVER DOES NOT WAIVE ANY CLAIMS THAT CANNOT BY LAW BE RELEASED OR WAIVED.

I ALSO AGREE THAT THE PRINCETON SCHOOL DISTRICT SHALL ASSUME NO LIABILITY WHATSOEVER FOR INJURIES RESULTING FROM THE ABOVE SITUATIONS OR ANY OTHER SITUATION WHERE CONTRACTED TRANSPORTATION IS NOT BEING USED TO TRANSPORT STUDENTS.

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND UNDERSTAND ITS CONTENTS. I AM AWARE THAT BY SIGNING THIS RELEASE OF LIABILITY, I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE DISTRICT, ITS OFFICERS, INSURERS, ATTORNEYS, AGENTS, BOARD MEMBERS, EMPLOYEES, REPRESENTATIVES, OR OTHER PERSONS ACTING FOR OR ON BEHALF OF THE DISTRICT.

CAUTION: READ BEFORE SIGNING!

THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND WILL BAR YOUR RIGHT TO SUE!

Student's Name (Print): _____ Age: _____

Date of Birth (if under 18): _____

Address: _____ City: _____
State: _____ Zip Code: _____

Student's Signature: _____

Date: _____

PARENT AGREEMENT

As parent and/or legal guardian of the above-named minor competitor, I hereby give permission for my child or ward to forego District provided transportation. I have read and understand the above **RELEASE OF LIABILITY** and, on my behalf and on behalf of my child or ward, I agree to all terms contained therein. I represent I have full authority to sign on behalf of my child or ward, realizing this Release of Liability is binding upon my child or ward as well as myself. I, on behalf of myself and my child or ward, agree not to bring any action or lawsuit against the district, its officers, insurers, attorneys, agents, board members, employees, representatives, or other persons acting for or on behalf of the district.

Parent's or Legal Guardian's Signature*:

Date: _____

*Parent or Guardian signature must accompany minor signature.

ATTENTION: PARENTS: THIS FORM MUST BE COMPLETED AND RETURNED (INSERT NUMBER) HOURS PRIOR TO THE DECISION TO DECLINE DISTRICT PROVIDED TRANSPORTATION.

Parent/Guardian Signature

Date

Princeton School District Student Alternate Transportation Form

Students participating in off-campus District-sponsored activities, including, but not limited to, Youth Option classes, practices, games, meetings, competitions, and conferences ("Events"), and/or special circumstances with district administrator approval, are required to travel on school buses or by other District-designated methods of transportation. At the District's sole discretion, after a separate Student Alternate Transportation Form has been properly executed, Students may transport themselves to and from designated activities. Before District authority is granted to the Student to drive to and from District-sponsored events, this Form and its required information must be completed and accepted by the School Office. The District's permission for the Student to drive to and from District-sponsored activities may be revoked or limited at any time, for any reason.

Required Information

Name of Student Driver:	
Wisconsin Driver's License No. & Exp. Date:	
Any License Restrictions:	
Vehicles(s) to be Driven - Year/Make/Model:	
Vehicles(s) License Plate No(s):	
Insurance Carrier:	
Policy Number and Expiration Date:	

With this Form, you must also provide a photocopy of (a) the Student's Driver's license, and (b) the Insurance Policy Declarations Page showing that coverage exists for the Student and the vehicle to be driven. Should the Student's Driver's License or the Insurance Policy expire during the school year, updated photocopies showing renewal are required before the Student will again be eligible to transport himself/herself to District-sponsored activities.

Neither the Student nor the Student's vehicle is covered under the District's automobile liability coverage. By signing this Form, you agree that the Student and his/her parent(s)/legal guardian(s) are solely responsible for any resulting damage or injury to others. You also agree that the Student and his/her parent(s)/legal guardian(s) assume the risk of harm, injury or death to the Student or others, and that by voluntarily allowing the Student to operate his/her own vehicle, the Student and his/her parent(s)/legal guardian(s) will hold the District and its officers and employees free from all liability.

For the safety of our Students, in signing below, you are also agreeing to the following rules and requirements:

1. I/The Student will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription), lack of sleep, or distraction of any kind. I/the

Student will at all times comply with Wisconsin law regarding proper operation of the Vehicle, including compliance with all speed limits and posted signs and placecards.

2. I/The Student will not operate an automobile that I/The Student believe for any reason, is mechanically unsafe or that may become unsafe due to weather or other natural conditions. The automobile will have working seatbelts, which I/the Student will use at all times. The Vehicle(s) may be inspected by District representatives.
3. I/The Student will be the sole driver of the Vehicle unless authorized by administration to transport other students. I/The Student will follow all Wisconsin Graduated License requirements.
4. Student passengers must be included on this Form and the parent and/or guardian of the student passenger must sign acknowledging the same responsibilities that will hold the District and its officers and employees free from all liability.

Print Student Name

Student Signature

Date

Print Parent/Guardian Name

Parent/Guardian Signature

Date

Only identified passengers may ride with the student driver:

Print Student Passenger Name

Student Signature

Date

Print Parent/Guardian Name

Parent/Guardian Signature

Date

Print Student Passenger Name

Student Signature

Date

Print Parent/Guardian Name

Parent/Guardian Signature

Date

Received by:

Date: