LAS VIRGENES UNIFIED SCHOOL DISTRICT

TRANSPORTATION WAIVER / ALTERNATE TRANSPORTATION FORM

(Parent/Guardian/Coaches & Teachers)

and would l	I am the parent/legal guardian ofSchool:School:			
and would like my child to be transported to or from the activities listed below in the following manner:				
☐ I would like permission to drive my own child, in my own car, to and/or from the events listed below.				
I give permission for an advisor/teacher/coach/employee to drive my student in their personal vehicle and/or district vehicle to and/or from the events listed below. ***Employee/Volunteer Personal Vehicle Form (Proof of Insurance) is to be on file in the School Office. ***				
the	I give permission <u>for another parent to drive my child/children in their personal vehicle</u> to and/or from the events listed below. ***Employee/Volunteer Personal Vehicle Form (Proof of Insurance) is to be on file in the School Office. ***			
I give permission to my child to use his/her own vehicle WITHIN OUR LOCAL AREA AND AT THE SCHOOL'S DISCRETION. <u>DOES NOT APPLY IF DISTRICT TRANSPORTATION IS PROVIDED</u> . <u>It is understood and agreed that my son/daughter will not transport any other student in his/her vehicle</u> .				
DATE OF EVENT(S):	LOCATION(S)/PURPOSE(S):	NAME(S) OF ADULT(S) AUTHORIZED TO DRIVE MY STUDENT	PROOF OF INS.	
EVERTION.		DRIVE MI STODEM		
I, the undersigned, understand that my child may be at greater risk of injury or death by being transported in a private automobile instead of a school bus and assume such risk on behalf of my child. I/we agree not to hold Las Virgenes Unified School District and/or the school, or any of its agents or employees liable for any sum which I/we might claim as a result of injury, or property damage arising out of, or caused by any accident or occurrence during the time said student is being transported by me, or driving himself/herself, or driving with another adult to or from said practice, game or event in conjunction with the activities listed above. I further understand and accept that neither the school nor school district can be responsible for my child missing information provided during the trip to the event or returning. Neither my child, I, nor children I am driving, are guaranteed admittance to the event should we not be able to meet at the appropriate place or time upon arrival at the destination. NOTE: If you drive your personal automobile as a district volunteer while on district business and you are involved in an accident, by law your liability insurance policy is used first. The district liability policy would be used only after your policy limits have been exceeded. The district does not cover, nor is it responsible for,				
accept that induring the to the event NOTE: If you involved in used only at	ip to the event or returning. Neither neithould we not be able to meet at the aput drive your personal automobile as an accident, by law your liability insura	n be responsible for my child missing informating child, I, nor children I am driving, are guara peropriate place or time upon arrival at the destallative volunteer while on district business an ance policy is used first. The district liability poled. The district does not cover, nor is it response.	nt or occurrence th another adult derstand and ion provided nteed admittance tination. d you are olicy would be	

THIS SIGNED WAIVER MUST BE IN THE POSSESSION OF THE SUPERVISING FACULTY MEMBER PRIOR TO THE STUDENT'S RELEASE TO ANY ABOVE MENTIONED PARENT/GUARDIAN

Revised: March 2018