WARREN CONSOLIDATED SCHOOLS



6-12 SECONDARY STUDENT TRAVEL

PARENT AUTHORIZATION AND HOLD HARMLESS AGREEMENT FOR STUDENT TRAVEL TO AND FROM NON-ATHLETIC SCHOOL DISTRICT EVENTS AND ACTIVITIES

THIS AGREEMENT IS FOR PARENTS/GUARDIANS WHO AUTHORIZE THEIR STUDENT TO TRAVEL DURING THE SCHOOL DAY FOR NON-ATHLETIC SCHOOL ACTIVITIES SUCH AS DAYTIME FIELD TRIPS AND TRAVEL TO AND FROM DIFFERENT SCHOOL BUILDINGS AND/OR FACILITIES. EACH PARENT MUST REVIEW AND SIGN THIS FORM, WHICH RELEASES THE WARREN CONSOLIDATED SCHOOLS AND ALL OF ITS AGENTS FROM ANY AND ALL LIABILITY RELATING TO THE TRIP, EVENT, TRAVEL, OR ACTIVITY.

Student Name:	Emergency Contact Name & Telephone Number		
This form authorizes Student to travel to:			
☐ All Events Related To:			
☐ Specific Program/Event(s)/Date(s):			
My Student has my permission to travel to and from the event(s	s) in the following ways if authorized by the scho	ol district and/or consistent wi	th state law:
District-Provided Transportation			
☐ Via school bus when a bus is made available by the District (e.g	g. field trip)		
\Box With school personnel or volunteers in \Box District vehicles \Box Pe	ersonal vehicles (e.g. student traveling with staff me	mber for Spanish Club)	
Student-Provided Transportation (e.g. travel related to CPC, MN			
	7ith Passengers □ Only with Authorized Pass		
☐ In another Student's vehicle			
If your Student is only authorized to be transported by a pa	articular student(s), please identify here:		
Other Transportation			
☐ Specify here:			
I release the District of any responsibility for verifying any drive authorized to travel. I further agree to release, indemnify, and hold from and against any and all claims and/or damages, including cost without limitation, any personal injury to any participant. I have from Non-Athletic School District Events and Activities, know a for the Student's participation, and sign it of my own free will.	r's license restrictions or the vehicle insurance of d harmless Warren Consolidated Schools (the "District and attorneys" fees, related in any way to the above carefully reviewed this Parent Authorization and understand its contents, recognize that I am	the friend(s) or other student(s) rict"), its Board, officers, employ ve-referenced travel, excursion, a d Hold Harmless Agreement completely releasing the Distriction	with whom our Student is yees, agents, and volunteers activity, or event, including, for Student Travel to and ict of any possible liability
	(Printed Name and Signature)	Parent/Guardian	Date
I have carefully reviewed this Agreement and I agree to comregulations in the Student Code of Conduct and all rules establication may be canceled or suspended for failure to comp	`		with all of the rules and es. I understand that my the activity or event.
	(D. 1. 12)	a. I.	
	(Printed Name and Signature)	Student	Date 309