

Douglas County School District Transportation Release Form

Student:	Date:
Event:	Location:
I hereby acknowledge that I am the lawful parer student with the Douglas County School District, County School District approved event or activity District to release my student from the above even recognizing that the Douglas County School District for the travel referenced in this release.	, and who is participating in the above Douglas r. I hereby authorize the Douglas County School t as indicated in Administrative Regulation 216(a),
In so doing, and in consideration of the rights DISCHARGE THE DOUGLAS COUNTY SCHEMPLOYEES, REPRESENTATIVES, AND ASSACTION, CLAIMS, DEMANDS, OR EXPENSES IOUT OF THE PRIVATE TRANSPORATION OF M	HOOL DISTRICT, ITS INSURERS, AGENTS, SIGNS, FROM ANY AND ALL CAUSES OF IN ANY WAY CONNECTED WITH OR ARISING
I hereby represent and warrant that in signing represented by legal counsel of my own selection, fully familiar with all the circumstances incident he my own judgment and the advice of counsel of my the right to rely on such advice. I have been in representation or statement whatsoever by any peopreservant of the Douglas County School District.	, or that I have had full opportunity to do so. I amereto. In executing this release, I rely wholly upon own independent selection, or that I have waived no way influenced in making this release by any
Parent/Legal Guardian Name:	Phone #:
Parent/Legal Guardian Signature:	
For School Official Use Only	
☐ Photo ID Checked:(Signature of Dougla	as County School District Employee)