

CAVE CREEK UNIFIED SCHOOL DISTRICT 93

ALTERNATIVE TRANSPORTATION FOR SCHOOL DISTRICT EVENT AGREEMENT

Informed Consent, Assumption of Risk, Liability Release and Indemnity Agreement

The Cave Creek Unified School District 93 provides students with transportation to and from various school-related events. Students are encouraged to travel to and from the event in a vehicle provided by the School District. If parents want to drive their children or allow their student to drive to and/or from an event, please complete this document.

I am the parent or legal guardian of _____.

For the club/sport of, _____, during _____ season.

I would like my child(ren) to have alternative transportation in the following manner (X by those that apply):

- I will provide transportation for my child(ren) to or from (circle one or both) the event.
- I permit my child(ren) to drive to or from (circle one or both) the event.
- I give permission for another parent to drive my child(ren) to or from (circle one or both) the event.

I hereby waive, release, and discharge Cave Creek Unified School District 93, its employees, volunteers, coaches, sponsors, and participants from any and all claims or lawsuits for personal injury, property damage, or death resulting from the alternative transportation of my child to or from the event.

I agree to defend and indemnify Cave Creek Unified School District 93 and its employees, agents, and representative from and against any claims or lawsuits arising from or related to the alternative transportation of my child to or from the event. I understand that the School District does not provide any insurance for the alternative transportation. It is my responsibility to determine whether or not the alternative transportation is adequately insured.

I am aware that Cave Creek Unified School District 93 does not provide accident or health insurance coverage for me or my child during this event. I realize that the District's liability coverage only applies to injury if negligence is proven against the District and the terms and conditions of the contractual liability coverage provided in favor of the District have been met; in all other circumstances, my health insurance will provide coverage for my and my child's injuries.

I understand that this permission to provide alternative transportation must be approved by a school administrator.

I have read this agreement and fully understand its terms and agree that it shall be binding on my heirs and assigns.

Parent's Name and Signature

Date

Administrator's name and Signature

Date