

Please check or circle
all that apply

☐

Track

☐

6th - 7th - 8th

☐

Male - Female - Non Binary

2023-2024 Parent Transportation Release for Athletic Travel

Student Name: _____

#ID: _____

School: _____

I will provide transportation for my son/daughter from away contests when the coach allows athletes to ride home with parents who are in attendance. The adult responsible for driving will check my student out with the coach before leaving.

List all parent/legal guardians who are allowed to drive your child home.

Print Name: _____ **Ph#:** _____

Relationship to the student: _____

Print Name: _____ **Ph#:** _____

Relationship to the student: _____

Print Name: _____ **Ph#:** _____

Relationship to the student: _____

For travel inside of Jackson County, I provide permission for the following adult(s) to drive my child home (driver must be at least 21 years of age).

Print Name: _____ **Ph#:** _____

Print Name: _____ **Ph#:** _____

In the event of an accident or medical injury, your insurance and/or the vehicle insurance of any driver you have provided permission to drive your child is primary for taking care of any incident that may occur. Your signature acknowledges this understanding and provides permission for your son/daughter to travel with the above listed legal parent/guardian or other adult. You further agree, on behalf of yourself and your student(s) named above, to indemnify and hold the Medford School District free and harmless from and against any claim which you, any other parent or guardian of the student(s) identified above, or any other person or entity may have or claim to have for any losses, damages or injuries to your student(s) and/or their personal property arising, directly or indirectly, in connection with traveling to and from the locations. This release is intended to be interpreted and enforced to the maximum extent permitted by Oregon law. This release is good for the 2022-2023 school year and may be updated at any time.

Parent/Legal: _____ **Date:** _____

Guardian Signature

Print Name: _____

[This form will be retained in the athletic office and any updates initialed and dated or attached]