



**BALDWIN ATHLETICS
EMERGENCY WAIVER OF TRANSPORTATION**

I am the parent/guardian of _____
Student's Name

I hereby request that permission be granted to pick up my son/daughter:

Student's Name

after his/her interscholastic game or activity on _____
Date

Reason (**REQUIRED**):

I am fully aware that it is Baldwin UFSD School District Policy that students be transported to and from all games and activities on the transportation provided by the school. Only under extraordinary circumstances or for special situations is this request permissible.

I hereby agree that I will be fully responsible for and hold the School District harmless, Indemnify, and defend the district for any damages, including injuries to my child which may arise as a result of picking them up from this interscholastic activity.

Parent/Guardian Signature _____ Date: _____
(Driver)

Athletic Director/ Administrator _____ Date: _____

Coach _____ Date: _____
