



URSULINE ACADEMY High School

Ursuline Transportation Waiver

I, _____ parent/Guardian of _____, grant permission for my daughter to ride with any other Ursuline Academy of New Orleans **Parent/Legal Guardian** to and from any school sponsored event.

Yes

No

(Please Circle one)

I, _____ parent/Guardian of _____, grant permission for my daughter to ride with any other Ursuline Academy of New Orleans **Student Driver** to and from any school sponsored event.

Yes

No

(Please Circle one)

Parent Print Name

Parent Signature

Date (mm/dd/yyyy)
