



**COLTON JOINT UNIFIED SCHOOL DISTRICT
STUDENT VOLUNTARY TRANSPORTATION AGREEMENT**

NOTE: Although the District is providing transportation for a specific activity, there may be instances where a student or their parent(s) wish to provide for his/her transportation. It is important that parents/guardians agree in writing.

Student Name _____ School Name: _____

Activity(ies) & Date(s) _____

I understand the Colton Joint Unified School District is providing transportation to and from the above activity. However, I do not wish to avail my child of the transportation provided by the District.

The above student through his/her parent(s) hereby requests permission to provide his/her own transportation at his/her own expense.

IT IS FULLY UNDERSTOOD THAT THE DISTRICT IS IN NO WAY RESPONSIBLE, NOR DOES THE DISTRICT ASSUME LIABILITY, FOR ANY INJURIES OR LOSSES RESULTING FROM THIS NON-DISTRICT SPONSORED TRANSPORTATION. ALTHOUGH THE DISTRICT MAY ASSIST IN COORDINATING TRANSPORTATION AND/OR RECOMMEND TRAVEL TIME, ROUTES, OR CARAVANNING TO OR FROM THIS EVENT, I FULLY UNDERSTAND THAT SUCH RECOMMENDATIONS ARE NOT MANDATORY.

I ALSO UNDERSTAND THAT THE DRIVER IS NOT DRIVING AS AN AGENT OF OR ON BEHALF OF THE DISTRICT.

THE STUDENT AGREES NOT TO RIDE/CAR-POOL OR OTHERWISE SHARE TRANSPORTATION TO AND FROM THE ACTIVITY WITH ANY OTHER STUDENTS, TEAM PLAYER, OR SIBLINGS. IT IS UNDERSTOOD THAT THE DRIVER IS IN NO WAY ACTING OR WILL BE CONSIDERED AS AN AGENT OF THE COLTON JOINT UNIFIED SCHOOL DISTRICT.

Student Signature

Date

Parent/Legal Guardian Printed Name & Signature
(If Student under 18 years of age)

Date

District Approval Printed Name & Signature

Date