

**ACTIVITY BUS PARENT TRAVEL RELEASE FORM**

The undersigned, parent/guardian of \_\_\_\_\_, a student at Jamestown Public Schools,  
(student name) (grade)

Jamestown, North Dakota, hereby acknowledges that the general policy of the Jamestown Public School District is to require all students to be transported to and from games, meets, events, or any extracurricular activities related to the Jamestown Public School District in transport vehicles supplied by the Jamestown Public School District.

For and in consideration of the privilege of allowing the above-named student to be transported by means other than that provided by the Jamestown Public School District **to / from / or both** (circle one) the \_\_\_\_\_  
(name of sport/activity)

**game / meet / event** (circle one) located at \_\_\_\_\_ on \_\_\_\_\_, \_\_\_\_\_,  
(City) (Month) (Day) (Year)

the undersigned, parent/guardian of the above-named student, as parent/guardian of the minor child and for and on behalf of the minor child, release and discharge Jamestown Public School District of and from any and all liability, claims, or demands arising from any injuries or damages which might be suffered by the minor or any other parties or to property.

The undersigned is aware of the District's policy regarding transportation of students to such games, meets, and/or events and has made alternate transportation arrangements. The undersigned agrees to indemnify Jamestown Public School District against any loss or expense with respect to any action, claim, or demand of any person for injuries or damages which might occur to any persons or property; including, but not limited to the above-named minor child.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

**\*Complete IF child is riding home with someone other than parent\***

**PARENT'S DESIGNATION OF PARTY AUTHORIZED TO PROVIDE TRANSPORTATION**

I, the undersigned parent/guardian, have made arrangements for my above-referenced minor child to be transported **to / from / both** (circle one) said game, meet, or event by \_\_\_\_\_.  
(Name of Third Party Transporting Child)

It shall be my responsibility to insure that said child is in fact transported by the said individual and that said individual has adequate coverage for insurance\* purposes.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Coach/Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Athletic/Activity Director

\_\_\_\_\_  
Date

\*Meets State Requirements

This form must be submitted to the Activities Office a minimum of 24 hours prior to scheduled departure time.