Central Catholic
ATHLETICS

Co-Curricular Permission Slip for Student Driver

Event: Sport Team or activity the student is participating in: _____

Location: Various Locations based on practices and competitions

Dates: (Please Check)

◯**Fall Season: August 18-playoffs in November**

◯**Winter Season: November 18-playoffs in March**

◯**Spring Season: March 3rd-playoffs in June**

Mode of Transportation: Student's Personal Vehicle

My student has permission to drive themselves to and from the above-mentioned school-sponsored activity.

- I agree to allow my student to participate in this activity.
- I understand that Central Catholic High School provides transportation to/from this co-curricular activity; however, I know that transportation, because of my student's special circumstance for this activity only, is my responsibility as the parent of the student and/or at my discretion, and that I assume all risks inherent in that transportation
- I grant explicit permission for my student to drive to/from practices and matches
- I understand that direct supervision will be provided at the site of the co-curricular activity, as named above.
- I understand that it is my students' responsibility to receive directions to the various co-curricular sites from their coach or advisor.
- My student understands that they are not allowed to transport any other students in their vehicle.

By signing, I acknowledge that Central Catholic High School, its employees, coaches, and agents are not liable for any injury, loss, or damage that may occur during my student's personal transportation to and from the activity. I agree to release and hold harmless the school from any and all claims arising from such transportation."

I confirm that my student holds a valid driver's license and that the vehicle used for transportation is insured in accordance with state law.

This permission applies only to the specific instance(s) outlined above and does not grant general or ongoing permission for self-transport to other school-sponsored activities.

Parent/Legal Guardian Authorization:

I, _____, am the parent/legal guardian of

(Parent/Legal Guardian Name – Please Print)

_____, and I hereby give permission for my student

(Student Name – Please Print)

to participate in the school-sponsored activity described above and to transport themselves to and from the activity as outlined.

Signature: _____ Date: _____