



CENTRAL YORK SCHOOL DISTRICT

Pursuing Excellence: All Panthers. Every Day. In All Ways.

Away Athletic Event Transportation Form

Parent Permission for Transportation

I hereby give permission for my son/daughter to be transported by private vehicle to/from off-campus away events/activities of the Central York School District extra-curricular activity(ies) listed below. I understand that transportation by private vehicle is at my option and is not required as a condition of participation. I agree to forever release, discharge and hold harmless the Central York School District, its employees, agents, representatives, coaches, and volunteers from any and all causes of action, claims, demands and liabilities of whatever kind, name or nature in any manner arising out of or in connection with the transportation of my son/daughter by private vehicle. I understand my son/daughter remains subject to all applicable District and extra-curricular policies, guidelines, rules and expectations. I represent that I will assume sole and full responsibility for ensuring that my son/daughter arrives on time to such events/activities and that the transporter named below is a responsible licensed driver. This permission and release will remain in effect until revoked in writing.

Student Name

Sport

Name of Transporter

Relationship to Student

All legal parents/guardians must sign

Parent/Guardian Signature

Parent/Guardian Name (Please Print)

Date

Parent/Guardian Signature

Parent/Guardian Name (Please Print)

Date

Transporter

Signature of Transporter

Name of Transporter (Please Print)

Date

Received by: _____

Date: _____