

PASCACK VALLEY REGIONAL HIGH SCHOOL DISTRICT

Transportation Waiver and Release Form (Non-Parent/Guardian Driver)*

1. _____ (parent/guardian of child) has authorized me, _____ (name of individual transporting child), to transport _____ (name of child) to and from _____ ("Activity").
2. I understand and agree that the Pascack Valley Regional High School District Board of Education ("Board"), its officers, agents and employees are in no way responsible, nor does the Board assume liability, for any injuries or losses related to and/or resulting from me transporting _____ (name of child) to and from the Activity. As such, I am accepting full responsibility for any form of injury or property damage which may occur in connection therewith. I hereby release and hold harmless the Board, its officers, agents and employees from any and all liability, loss, damages, claims, or actions (including reimbursement of reasonable attorneys' fees) that result from me transporting _____ (name of child) to and from the Activity.

Print Name of Driver

Home Address

Home Phone

Emergency Phone

Signatures:

Witness

Driver

*Form must be submitted together with the "Waiver/Release to have Child Transported by Non-Parent/Guardian" form.