

Athletics / Extra Curricular Activities Transportation Permission Form

Date of Trip: _____

Location: From: _____ To: _____

Location: From: _____ To: _____

I hereby give consent for my son/daughter, _____
print name

to ride with the parent/guardian of _____
print name

to the location(s) above. I hereby agree, to the fullest extent permitted by law, to hold harmless, defend, and indemnify Turner Ashby High School and Rockingham County Public Schools from any and all claims, suits, demands, damages, losses, judgements payments, awards, and expenses (including reasonable attorney's fees and costs) that may arise in connection with this transportation.

SIGNATURE OF PARENT OR GUARDIAN

X _____
Signature of Parent or Guardian *Print Name* *Date*

I will be transporting the above named student and hereby agree, to the fullest extent permitted by law, to hold harmless, defend, and indemnify Turner Ashby High School and Rockingham County Public Schools from any and all claims, suits, demands, damages, losses, judgments, payments, awards, and expenses (including reasonable attorney's fees and costs) that may arise in connection with this transportation.

SIGNATURE OF PARENT OR GUARDIAN

X _____
Signature of Parent or Guardian *Print Name* *Date*

SIGNATURE OF SCHOOL ADMINISTRATOR

X _____
Signature of School Administrator *Print Name* *Date*

Approved _____ Not Approved _____ Reason _____