

St. Paul Public Schools Release of Liability Form

This document certifies that I, _____
Parent/Guardian's Name (please print)

_____ will be personally transporting my child

_____ have made transportation arrangements with:

Name of Adult (non-student)

Relationship

For my child _____
Student's Name

Date of activity _____

Type of activity _____

Reason for not using school provided transportation _____

I understand that St. Paul Public Schools requires that students utilize school sponsored transportation to and from all athletic events and activities. I agree that departure from this requirement will release the St. Paul Public Schools from all liability for any adverse results that may occur due to parentally approved alternate transportation to and/or from the above listed activity. I agree to release St. Paul Public Schools and its employees from all liability with reference to the above stated transportation.

I understand that no release of student is possible without the return of this form. This form must be completed and submitted to the School Representative in charge of the activity prior to taking the student.

Signature of Parent/Guardian

Signature of School Representative