

2019-2020 STUDENT TRANSPORTATION NOTICE AND PERMISSION FORM

At Veritas Academy we have many different athletic teams but limited methods of transportation to and from practice and games. Oftentimes, practices and games are held at facilities other than our own. Please communicate carefully and regularly to your students how you wish for them be transported to sporting events this season. Veritas is not able to coordinate private rides for student athletes or monitor their individual transportation. We ask that families take responsibility for arranging their children's transportation to sports practices and games. We realize that it can oftentimes be convenient for student athletes to ride with student drivers to athletic events, but that not all families allow their children to ride with student drivers. If you do not wish for your child(ren) to ride with student drivers, please inform them of this and make other arrangements for them to be transported to practices and games. If you do give permission for your child to ride with a student driver, please indicate so by checking the box below.

We are able to help in the transportation process this year by running a bus from Veritas to practices each day except for Wednesdays during the season. Please indicate below if you would like to give permission for your child to ride on the bus to practice.

Student Name(s): _____

Student Grade(s): _____

STUDENT DRIVER PERMISSION: By signing below, I (the parent/guardian of the student named above) give my permission for my son/daughter to drive to Veritas Academy associated athletic activities in a privately owned and operated vehicle by a licensed student driver. My consent includes transportation to all related programs and activities associated with Veritas Athletics. Also, as a parent or guardian, I authorize the treatment of my child by a supervising Veritas staff member and/or a qualified, licensed medical professional in the event of a medical emergency which, at the discretion of the attending staff member and/or medical professional, is necessary for the well-being of my child. By signing below, I acknowledge and accept the risks of physical injury associated with the participation in the transportation described above. Except for gross negligence on the part of the driver, I accept personal financial responsibility for any bodily or personal injury sustained during travel. Further, I promise to hold harmless Veritas Academy, its representatives, and/or the licensed student driver involved for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, I agree to resolve the matter through a mutually acceptable arbitration process.

BUS PERMISSION: By signing below, I (the parent/guardian of the student named above) give my permission for my son/daughter to drive to Veritas Academy associated athletic activities in the school owned and insured bus operated by a licensed driver. My consent includes transportation to all related programs and activities associated with Veritas Athletics. Also, as a parent or guardian, I authorize the treatment of my child by a supervising Veritas staff member and/or a qualified, licensed medical professional in the event of a medical emergency which, at the discretion of the attending staff member and/or medical professional, is necessary for the well-being of my child. By signing below, I acknowledge and accept the risks of physical injury associated with the participation in the transportation described above. Except for gross negligence on the part of the driver, I accept personal financial responsibility for any bodily or personal injury sustained during travel. Further, I promise to hold harmless Veritas Academy, its representatives, and/or the licensed driver involved for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, I agree to resolve the matter through a mutually acceptable arbitration process.

Phone: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____