

MILLARD PUBLIC SCHOOLS
FIELD TRIP AND INTERSCHOLASTIC ACTIVITIES TRANSPORTATION GUIDELINES FOR MIDDLE SCHOOLS
Please provide the information below and place an "X" in the appropriate box or boxes.

I/We, _____ and _____, parent(s)/legal guardian(s) of _____,
(Printed first and last name of parent/guardian) (Printed first and last name of parent/guardian) (Printed first and last name of student)

Male Female Grade _____,

Consent and approve of the use of **alternative transportation** to and/or from the field trip, game, contest, or event for the current school year, provided that the use of alternative transportation is approved by the school administration. I/We acknowledge that by signing this document that I/we are voluntarily releasing the District of any responsibility, duty or obligation to provide the transportation to and/or from the field trip, game, contest or event.

- Provided by us, as the **parents/guardians**, for our daughter/son named above
- Provided by **another parent** for our daughter/son named above
- Provided by **me/us for other students**
- Provided by a **Millard Public School employee or volunteer**

I/We acknowledge that the vehicle used for alternate transportation shall carry insurance coverage on such vehicle in an amount equal to or greater than the minimum required by Nebraska law and that seat belts must be used by all occupants of the vehicle used for alternative transportation. I/We acknowledge that I/we must inform the school administration if and/or when the vehicle used for alternative transportation no longer carries insurance coverage on such vehicle in an amount equal to or greater than the minimum required by Nebraska law. I/We acknowledge that the school does not verify the licensure, driving records, or the insurance coverage of parents, students, district employees and volunteers, and/or vehicles used for alternative transportation of students to and/or from off-campus activities. I/We acknowledge that the use of alternative transportation involves inherent risks of an accident that may result in property damages, personal injuries, or death, and I/we voluntarily accept and assume such inherent risks and voluntarily waive and release the District of any and all responsibility, duty, obligation, or liability therefor.

- This form applies to extracurricular activities/clubs only.
- This form applies to curricular field trips only.
- This form applies to extracurricular activities/clubs and field trips.

Place a check by all of the sports in which the student will participate:

- Basketball, Cross Country Club, Football, Track,
- Volleyball, Wrestling, Other: _____

 (Parent's/Legal Guardian's Signature)

 (Date)

 Accepted by:
 (School Administrator's or Designee's Signature)

 (Date)

 (Parent's/Legal Guardian's Signature)

 (Date)