



Statesboro High School

Extra-Curricular Transportation Release Form

School Year 2016-2017

I am granting permission for my child _____, age _____
to be transported in private transportation from away events related to the sport
_____ for Statesboro High School during the 2016-2017 school year.

I understand SHS is providing transportation that my child will not utilize, and I understand that SHS will not provide adult supervision in the private transportation.

I request that my son/daughter be allowed to travel in this fashion.

The undersigned agrees to release, discharge, defend, hold harmless and indemnify Bulloch County Schools, its agents, employees, officers, trustees, representatives, insurers and others acting on behalf of Bulloch County Schools, of and from all claims, demands, causes of actions and legal liabilities for injuries or death to my son/daughter due to his/her ordinary negligence or willful and wanton misconduct on the part of Bulloch County Schools, not to bring any claims, demands, legal actions, and causes of action for any economic and non-economic losses due to bodily injury, death, or property damage sustained by my son/daughter.

Student Name

Parent Name

Student Signature

Parent Signature

Date

Date