

Saint Joseph High School
Student Transportation Waiver

As the parent / Guardian of _____ a _____ grade student at
(Student's Name) (Grade)

Saint Joseph High School and participant in _____,
(Activity)

I give my permission for him / her to use transportation, other than school provided transportation, to travel to and from this school activity. I give my permission for him / her to be transported by a licensed Saint Joseph High School student. I hereby release and fully forever discharge Saint Joseph High School, and all of its administrators, teachers and staff, supervisors, and agents, from liabilities, claims, demands, suits and causes of action of every kind in any way relating to or arising out of his/her participation in the above activity.

(Signature of Parent / Guardian)

(Date)

(Signature of SJHS Administrator / Head Coach)

(Date)