

Defiance College Transportation Parental Approval Form

Detectives of Defiance: Got Clue? Camp

Date: _____

Student's Name: _____

Student's Date of Birth: _____

Dear Parent/Caregiver:

In order for your child (under 18 years of age) to be transported using Defiance College vans, parental permission is required.

We will use the Defiance College vans for transportation to and from activities including: to and from the airport, field trips, educational events, shopping, sporting events, dining out and other possible outings or activities.

Your signature will indicate that you grant permission for your child to participate in transportation with the Detectives of Defiance: Got Clue? Camp, provided by Defiance College. The vans will be driven by, only, faculty or staff of Defiance College.

Please circle the appropriate box below, provide a signature and return to me by **Monday, June 15, 2015**

Sincerely,

Alyson Laframboise
Detectives of Defiance: Got Clue? Camp Coordinator

YES My signature indicates that I grant permission for my child, as a student enrolled in the Detectives of Defiance: Got Clue? Camp, to be transported using Defiance College vans to and from the airport, field trips, educational events, shopping, sporting events, dining out and other possible outings or activities as part of his/her participation in the Detectives of Defiance: Got Clue? Camp.

NO My signature indicates that I **do not** grant permission for my child, as a student enrolled in the Detectives of Defiance: Got Clue? Camp, to be transported using Defiance College vans as part of his/her participation in the Detectives of Defiance: Got Clue? Camp.

Parent/Caregiver Signature _____

Important Legal Notice

(Please Read Carefully)

I am fully aware of the risks and hazards connected with the transportation arrangement described on page one of this form, including, the possibility of automobile accidents and the like. I hereby elect to voluntarily be transported in such motor vehicle. I, for myself, our family and my child or ward, voluntarily assume full responsibility for any risk of loss or damage to person or property, including serious injury or death.

In addition, I for myself, our family and my child or ward, hereby agree to indemnify and hold Defiance College and/or Defiance City Schools, its Trustees, employees and volunteers, harmless from any loss, liability, damage or costs, including court costs and/ or attorney's fees, that they may incur due to my participation in said activity, whether caused by negligence of the aforementioned or otherwise.

It is my express intent that this Agreement shall bind the members of my family and spouse, as well as all heirs, assigned as personal representatives.

This is a general release of liability. Please read it prior to signing the form.

Participant Name

Date

**Signature of Parent/Guardian
(If student is under 18 yrs.)**

Date