

**PARENT'S RELEASE**

The undersigned, parent/guardian of \_\_\_\_\_, a student at the Jamestown Public Schools, Jamestown, North Dakota, hereby acknowledges that the general policy of the Jamestown Public School District is to require all students to be transported to and from games, meets, events of extracurricular activities related to Jamestown Public School District in transport vehicles supplied by the Jamestown Public School District.

For and in consideration of the privilege of allowing the above named student to be transported, by means other than that provided by Jamestown Public School District, to and/or from the \_\_\_\_\_ (game / meet/ event) located at \_\_\_\_\_ on \_\_\_\_\_ 2019-2020, the undersigned, parent/guardian of the above named child, as parent/guardians of the minor child and for and on behalf of the minor child, release and discharge Jamestown Public School District of and from any and all liability, claims, or demands arising from any injuries or damages which might be suffered by the minor or any other parties or to property.

The undersigned is aware of the District's policy regarding transportation of student to such events; and I have made alternate transportation arrangements. The undersigned agrees to indemnify Jamestown Public School District against any loss or expense with respect to any action, claim, or demand of any person for injuries or damages which might occur to any persons or property, including; but not limited to the above named minor child.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2019-2020.

\_\_\_\_\_  
PARENT OR GUARDIAN

**PARENT'S DESIGNATION OF PARTY AUTHORIZED TO PROVIDE TRANSPORTATION**

I have made arrangements for the above named child to be transported to and/or from said game/event by \_\_\_\_\_. It shall be my responsibility to insure that said child is in fact transported by the said individual and that said individual has adequate insurance\* purposes.

\*Meets State Requirements

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2019-2020.

\_\_\_\_\_  
PARENT OR GUARDIAN

WITNESS \_\_\_\_\_

APPROVED COACH/ADVISOR \_\_\_\_\_

DATE: \_\_\_\_\_

ATHLETIC/ACTIVITY DIRECTOR \_\_\_\_\_

DATE: \_\_\_\_\_