

CAPISTRANO UNIFIED SCHOOL DISTRICT San Juan Capistrano, California

PARENT/GUARDIAN PERMISSION FORM Student-Arranged Self-Transport to an Off-campus Activity

Under my guidance, I hereby give permission for my c to arrange his/her own transportation to/from the activit drive his/her own vehicle. I understand that when my c or voluntarily drives to/from any activity or event, Ca liable for any injuries or harm which may occur during voluntarily driving to or from the activity (Education California law requires vehicles to be insured and that a agree that my child will not be allowed to transport other	cy/sport as listed below, or to voluntarily child arranges his/her own transportation apistrano Unified School District is not gethe time he/she is being transported of Code Section 44808). I understand that Il drivers carry a valid driver's license.
Name of Activity/Sport	
Date(s) and/or Season of Activity/Sport This permit will expire at the conclusion of the above dates and will be revoked if the student if found transporting other students.	
By my signature below, I agree to waive all claims and hold the District, its officers, agents and employed or claims, demands, losses, causes of action, suits or jubodily injury or illness, or property damage that mahis/her own vehicle.	ees, harmless from any and all liability udgments of any kind including death
Parent/guardian signature	Date
Print Parent/guardian Name	_