

Student's Last Name: _____



Field Trip Driver Agreement | 2016 – 2017

If you think you will ever participate in a school field trip as a driver, please fill out this form and return to the front office prior to or during the first week of school.

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

We/I can drive and take _____ number of passengers in the back seat with seat belts

Automobile liability insurance company: _____

Amount of Liability Insurance Held: \$ _____

Policy # _____ Expiration date of policy: _____

Have you been involved in a vehicular accident or been issued a ticket in the last three years?

YES NO

If YES, please give details of each incidence: _____

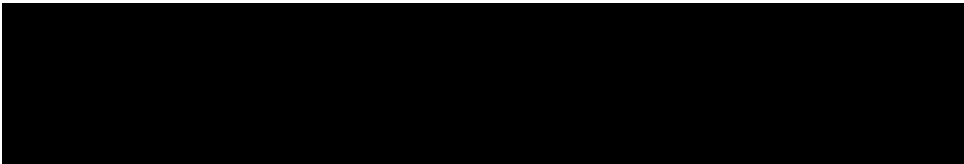
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- I understand that before I drive on a field trip I must provide a valid driver's license and insurance card.
 - All children under 12 years of age must be in the back seats only.
 - Everyone in the vehicle must wear seatbelts.
 - We ask that those driving not make unscheduled stops to stores, fast food restaurants, banks, gas stations, etc. unless prior approval is given.
 - Use of cell phone while driving is prohibited except in the case of an emergency.
 - All persons accompanying a field trip must refrain from smoking.
 - Parents are not to bring any other children on a field trip unless prior approval is given.
 - All driver volunteers will also be chaperoning a group of students, assigned by the teacher, and are agreeing to stay the entirety of the field trip.
1. Hereby releases, waives, discharges and covenants not to sue, Pace Brantley School, their officers, employees and agents, all for purposes herein referred to as Releases, from all liability to the undersigned and Student, their personal representatives, assigns heirs and next of kin, for all loss or damage, and/or claims, demands, causes of actions or suit of any kind therefore, particularly on account of injury to the person or property or resulting in the death of Student, whether caused by the negligence of Releases or otherwise, while Student is a participant in the aforementioned event;

2. Hereby agrees to indemnify and save and hold harmless the Releases and each of them from any loss, liability, damage, or cost they may incur while Student is a participant in the aforementioned event, whether caused by the negligence of the Releases or otherwise;
3. Hereby assumes full responsibility for and risk of bodily injury, death or property damage due to the negligence of Releases or otherwise while Student is a participant in the aforementioned event;
4. Hereby agrees that if any portion of the Agreement is held invalid, that the balance shall, notwithstanding, continue in full legal force and effect.

Mother's Signature: _____ Date: _____

Father's Signature: _____ Date: _____

Please complete and return this form to the front desk prior to volunteering
to drive students on behalf of _____



Field Trip Permission Form

EVENT:

DATE:

_____ A.M. DEPARTURE TIME
_____ P.M. ANTICIPATED RETURN TIME

NAME OF STUDENT: _____

The undersigned, who is the parent/guardian of _____, a minor (hereinafter referred to as "Student"), on behalf of himself and student, their personal representative, assigns, heirs and next of kin, request Student is permitted to participate in the aforementioned event:

5. Hereby releases, waives, discharges and covenants not to sue, Pace Brantley School, their officers, employees and agents, all for purposes herein referred to as Releases, from all liability to the undersigned and Student, their personal representatives, assigns heirs and next of kin, for all loss or damage, and/or claims, demands, causes of actions or suit of any kind therefore, particularly on account of injury to the person or property or resulting in the death of Student, whether caused by the negligence of Releases or otherwise, while Student is a participant in the aforementioned event;
6. Hereby agrees to indemnify and save and hold harmless the Releases and each of them from any loss, liability, damage, or cost they may incur while Student is a participant in the aforementioned event, whether caused by the negligence of the Releases or otherwise;
7. Hereby assumes full responsibility for and risk of bodily injury, death or property damage due to the negligence of Releases or otherwise while Student is a participant in the aforementioned event;
8. Hereby agrees that if any portion of the Agreement is held invalid, that the balance shall, notwithstanding, continue in full legal force and effect.

Signature of Parent/Guardian

Date

MEDICAL INFORMATION

In the event Student becomes ill, I authorize the faculty or chaperones to obtain medical attention at a physician's office or hospital. Student is covered by the following medical insurance:

Insurance Co. Name: _____ Group No.: _____
Allergies: _____ Chronic/Acute Illnesses: _____

I UNDERSTAND THAT EVERY EFFORT WILL BE MADE TO REACH ME BEFORE MEDICAL PERMISSION IS GIVEN TO TREAT MY CHILD.

Home Telephone No.: _____

Mother's Work No.: _____

Father's Work No.: _____

Mother's Cell No.: _____

Father's Cell No.: _____

Signature of Parent/Legal Guardian

Date