

SEDALIA SCHOOL DISTRICT PRIVATE TRANSPORTATION CONSENT FORM

My child,	, has my permission to travel from
school property (or other location) to any activity or athletic event by private transportation, either as the driver or as a passenger in a private automobile driven by another student, parent, or other person. I understand and acknowledge that the Sedalia School District #200 will have no financial or legal responsibility for injuries arising out of such travel.	
administrators, employees, and other arising from my child's travel to any a agree to indemnify and hold harmless administrators, employees, and other	the District, as well as its directors, officers, agents from all liability for any and all injuries activity or athletic event via transportation. I further the District, as well as its directors, officers, agents, against any claims asserted by my child as a ty or athletic event via private transportation.
Parent or Guardian Signature	Parent or Guardian Signature
Date	Date
arising out of my travel from school (further acknowledge that I have a resplocation) to any activity or athletic event athletic event on time may result in diffrom that activity or athletic team. If during travel to any activity or athletic	ave no financial or legal responsibility for injuries or other location) to any activity or athletic event. I consibility to travel directly from school (or other ent, and that failure to report to that activity or ascipline, up to and including possible dismissal further acknowledge that inappropriate conduct c event may result in such discipline, as well as Education Policy, as such Policy applies to out-of-
Student Signature	
Date	