

MOUNT SI HIGH SCHOOL TRANSPORTATION FORM

Name of Athlete _____

Sport _____

Mount Si High School provides one-way transportation for high school student-athletes to away contests. Parent carpools may be needed to transport students home afterwards. Please indicate whom you will allow to drive your student home, your availability to drive others, and information about your vehicle.

Please initial ALL that apply and sign below.

_____ Yes, I can provide transportation for the following number of students _____ and have provided my vehicle information below.

_____ No, I will not be able to provide transportation and will need assistance providing transportation for my student.

_____ I give my permission for my student to ride home with the following adults (please list):

Name: _____

Name: _____

Name: _____

_____ I give my permission for my student to ride home with ANY parent(s) available to provide transportation.

(Signature)

(Date)

Automobile information:

Notice: By signing below, I certify that:

I have automobile liability insurance and understand that such insurance is primary before any other collectible insurance. My vehicle is in safe operating condition, is equipped with seat belts that will be used by each passenger, and that I drive in a safe manner and in accordance with state laws.

Registered Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Vehicle License # _____ State: _____

Driver License # _____ Expires _____

Insurance Company: _____ Agent _____

Limits of Coverage: _____

(Signature)

(Date)

