

St. Paul Public School Release of Liability Form

This document certifies that I, _____ parent or
Printed Parent/Guardian Name
guardian of _____
Child's Printed Name

Will be personally transporting my child

Have made arrangements with : _____ to
Name of Adult(non-student) & Relationship
transport my child.

_____ on _____.
Name of Activity *Date of Activity*

I understand that St. Paul Public Schools requires that students utilize school sponsored transportation to and from all athletic events and activities. I agree that departure from this requirement will release St. Paul Public Schools from all liability for any adverse results that may occur due to parentally approved alternate transportation to and/or from the above listed activity. I agree to release St. Paul Public Schools and its employees from all liability with reference to the above stated transportation.

I understand that no release of any student is possible without the return of this form. This form must be completed and submitted to the School Representative in charge of the activity prior to the event.

Signature of Parent/Guardian

Signature of School Representative