

**TOWNSHIP HIGH SCHOOL DISTRICT NO. 113
INDIVIDUAL STUDENT TRANSPORTATION FOR ATHLETIC ACTIVITIES
PARENT CONSENT AND LIABILITY RELEASE**

I/We, _____, give permission and authorize my/our student, _____, to travel to and from athletic activities _____ (“Athletic Activities”) individually. This transportation may include, but is not limited to, transportation provided by parents or other adults, as well as a student transporting themselves or other students.

I/We acknowledge that we are voluntarily choosing for my/our student travel to and from the Athletic Activities separately from the transportation provided by Township High School District No. 113 (“District”). I/We understand that no employee or representative of the District will accompany my/our student during his/her transportation to and/ from the Athletic Activities and that the District will not monitor how I/my student is transported to or from Athletic Activities. I/We knowingly and voluntarily assume all risks associated with my/our student’s transportation to and from the Athletic Activities, including the risks of any injury, accident, illness, allergic reaction, damage or loss to person or property, or other harm arising out of, related to, or connected with this transportation.

RELEASE FROM LIABILITY

By signing this form, to the fullest extent permitted by the law, I/we hereby fully and unconditionally release, waive, indemnify, and hold harmless the Board of Education of Township High School District No. 113, as well as its individual Board members, employees, agents, attorneys, representatives, volunteers, and successors, from any and all liability, including but not limited to, actions, causes of action, any and all damages, debts, claims, obligations, personal injuries, including death, disabilities, medical expenses, attorney’s fees, or other demands of any kind and nature whatsoever which may arise out of or in connection with the transportation of my/our student to and from the Athletic Activities. The terms of this liability waiver shall also serve as a release for my/our heirs, estate, executors, administrators, assignees and agents.

I/We have carefully read this Consent and Liability Release, fully understand its terms, and execute it voluntarily. I/We know that by signing this document, I/we waive my/our right to sue and agree to hold harmless the Board of Education of Township High School District No. 113, and its individual Board members, employees, agents, attorneys, representatives, volunteers, and successors.

Signature of Parent/Guardian

Date: _____

Signature of Parent/Guardian

Date: _____

Signature of Student (if 18 years of age or older)

Date: _____