



**CLEARVIEW PUBLIC SCHOOLS**  
**Liability Waiver and Release Form**  
**Parent/Student Declining School Board Transportation**

Clearview School Division (Clearview Public Schools) makes every effort to provide School Board Transportation for various educational and extra-curricular events and activities. At certain times parents and/or students may wish to use other methods of transportation. Therefore, Clearview Public Schools requires the following Liability Waiver and Release Form to be completed when a parent/student declines School Board Transportation.

**Acknowledgement**

1. Clearview Public Schools is providing School Board Transportation for the educational/extra-curricular event or activity.
2. The parent/student was offered school bus transportation and has declined it;
3. The parent/student accepts responsibility for the student's transportation;
4. The parent/student, successors, heirs, assigns or personal representative waive the right to sue or otherwise claim against The Board of Trustees of Clearview School Division No. 71, or its employees, volunteers, officials, sponsors, agents, coaches, or independent contractors for any loss or damage connected with any property loss or personal injury that the student sustains while using non-School Board Transportation to travel to/from the off-site activity;
5. The parent/student will not transport any other student whom he/she is not authorized in writing by such student's parent as per Board Policy on Co-Curricular and Extra Curricular Trips; and
6. The parent/student accepts that Clearview Public Schools' Student Accident Insurance does not apply during the transportation portions of the trip, and the student is only covered from the time the student arrives at the school sponsored off-site activity until the student leaves the off-site activity.

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I ACKNOWLEDGE THAT I HAVE READ THIS DOCUMENT THOROUGHLY.

- I ACKNOWLEDGE THAT I AM OF THE FULL AGE OF 18 YEARS.
- I HAVE READ AND I AGREE TO THE TERMS AND CONDITIONS OF THIS AGREEMENT.
- I UNDERSTAND THAT BY SIGNING THIS DOCUMENT THAT I GIVE UP SUBSTANTIAL LEGAL RIGHTS THAT I WOULD OTHERWISE HAVE.
- I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

**Please Print Student/Parent/Guardian Information**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: Street:

\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Student/Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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The information on this form is collected pursuant to section 33(c) of the *Freedom of Information and Protection of Privacy Act* in order to facilitate the desired use of privately owned and operated transportation. Any questions related to the collection of this information may be directed to FOIP Coordinator at (403) 742-3331.