



**LIBERTY UNION HIGH SCHOOL DISTRICT
ATHLETIC DEPARTMENT**

ATHLETIC EXCURSION PERMIT & RELEASE

I, _____, give my permission for my son/daughter/ guardian, _____, to ride as a passenger in a personal vehicle driven by an adult assigned by school staff on designated athletic field trips. Further, I hereby waive any and all claims against the Liberty Union High School District and/or the State of California and/or their officers, agents, or employees and/or chaperones for injury, accident, illness, death or any loss or damage to personal property.

I further agree that in the event that in the opinion of a duly authorized chaperone it becomes necessary to procure emergency medical care for the above-named student due to accident or illness, such care may be procured without my consent. I personally assume responsibility for any costs of such care not covered by insurance.

Signature of Parent and/or Lawful Guardian

Date

