

HERITAGE HIGH SCHOOL
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 Heritage High 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



ATHLETIC TRANSPORTATION BY PRIVATE VEHICLE

Please fill out and sign this notice as indication that you will be able to assist in transporting students to games this season.

Private Vehicle Pupil Transportation Minimum Requirements

1. Insurance – Public Liability

Bodily Injury	\$100,000/300,000 per accident
Property Damage	\$50,000 per accident
Medical Payment	\$2,000

2. Financial Charge

No financial charge to the District shall be made for pupil transportation by private vehicle.

3. Number of Passengers (Exclusive of Driver)

The number of passengers to be transported in any one vehicle shall not be more than the legally permissible number of passengers deemed appropriate for the vehicle.

PLEASE GIVE THIS FORM TO YOUR COACH AT THE BEGINNING OF THE SEASON

1. I understand these transportation minimum requirements and do carry insurance with:

Insurance Co. _____

Effective Dates _____

Policy # _____ Limits _____

2. I will be able to furnish transportation on the following date: _____

3. Number of passengers I can transport: _____

Date: _____ Parent's Signature _____