School District of Niagara
Extra-curricular Transportation Policy/Form

If parents/guardians provide transportation to/from, or allow another adult to provide transportation to scheduled interscholastic events, including practices, they must be aware that the following policies are in effect.

- Where the parent/guardian provides transportation to their son/daughter to or from a scheduled event, including practices, the parent/guardian shall assume all relating liability, and the school shall assume no liability.
- Where a parent/guardian, or another adult designated by the parent/guardian transports students other than their own to or from a scheduled event, including practices, the parent/guardian or designated adult transporting the students shall assume all resulting liability, and the school shall assume no liability.
- When the student transports himself/herself to a practice the parents/guardians if that student assume liability, and the school assumes no liability.
- Where a student transports other students to or from a practice, parent/guardian of the transporting student assume all resulting liability, and the school shall assume no liability.
- The School District of Niagara encourages all students to take the school provided transportation when possible.

TRANSPORTATION LIABILITY WAIVER

I have read the Athletic Transportation Policy and agree that I shall assume all liability for negligently cause injuries resulting from the following situations:

- Where I transport my son/daughter to or from scheduled events
- Where I transport other students to or from scheduled events, or I, as a parent/guardian, give permission to another adult to transport my son/daughter home from a scheduled event and have explained to the designated individual he/she will assume liability
- Where my son/daughter transports himself/herself to or from a practice
- Where my son/daughter transports other students to or from a practice

I also agree that the School District of Niagara shall assume no liability whatsoever for negligently caused injuries resulting from the above situations or any other situations where contracted transportation is not being used to transport athletes

Parent/Guardian Signature__________________________ Date________________

REQUEST FOR ALTERNATE TRANSPORTATION

Sport:_______________________ Student Name:________________

My Child, named above, will not be riding the team bus/van on ______________ because my child will be:

___ 1-Riding with his/her parent/guardian  ___ 2- Riding with designated adult
___ 3-Driving (practice only)  ___ 4- Riding with designated minor (practice only)

Parent/Guardian Signature:__________________________ Date:________________

AD or Coach Signature:__________________________ Date:________________