



TRANSPORTATION CONSENT FORM

THIS CONSENT FORM IS TO BE SIGNED ONLY AFTER UNDERSTANDING AND AGREEING TO THE INFORMATION BELOW. IF THIS FORM IS NOT COMPLETED AND RETURNED PRIOR TO THE SCHOOL ACTIVITY, THE STUDENT WILL REMAIN WITH THE TEAM AT ALL TIMES, SUPERVISED BY A SCHOOL APPROVED TEACHER/COACH.

Cardinal Gibbons will provide school transportation for all students, to and from school, for all athletic games and trips. Students are required to travel with the team in school provided transportation, unless a parent (or legal guardian) provides explicit consent, per event, for alternative transportation. Consent must be provided in advance and must meet the school criteria as defined in this document.

* When students are transported by vehicles owned by Cardinal Gibbons High School, the school vehicle liability coverage is applicable to any vehicular accident. When privately-owned vehicles are used for transporting students, only the vehicle owner's liability coverage is applicable to any vehicular accident. If student transportation is by a private vehicle, the vehicle owner's liability coverage is applicable to any vehicular accident. Parent or adult drivers should be aware that they may be held responsible for injuries to any individuals they are transporting and must certify that any private vehicle used is covered by at least the North Carolina State required insurance coverage.

Event Details

Event _____ Sponsoring Team _____
Date of Event _____ Location _____
Name of Student (print) _____

Consent for Alternate Transportation

- Our child will not be traveling to / from (circle one or both) the event on school provided transportation. Our child will either be driving him/herself, will be riding with a parent or legal guardian, or will be riding with another adult of our choosing. I understand that my child may NOT transport another student (or ride with another student driver) to and from a school sanctioned athletic activity.
I understand that this activity will take place away from school grounds and that my child will not be supervised by a school employee while driving to and from this activity. The coach or event sponsor will only be responsible for supervision during the event after my child arrives at the event and checks-in with the coach/sponsor, and before checking-out with the coach at the conclusion of the event.
I have read the above statements regarding expectations, supervision, and accident insurance coverage on Cardinal Gibbons' trips or athletic events. I also understand that I, or the owner of the vehicle being driven by me (or my child) on this trip, may be personally responsible for injuries that occur to the individuals being transported.

I REQUEST THAT THE BELOW-NAMED STUDENT BE ALLOWED TO PARTICIPATE IN THE ACTIVITY PLANNED AND SPECIFICALLY CONSENT TO ALTERNATE TRANSPORTATION.

Print Parent/Guardian Name Signature Date
Print Student Name Signature Date