

PLANO INDEPENDENT SCHOOL DISTRICT
Release of Liability for Student Participation in School-Sponsored Trip(s)
Via Alternative Transportation

Name of Activity: _____

Grade Level/Group Attending: _____

Date(s) of Activities: _____ **Departure:** _____ **Return:** _____

Destination: _____ **City:** _____

Alternate Travel is (Please Circle): **TO EVENT** **FROM EVENT**

TRAVEL RELEASE

I desire that my student be allowed to participate in the activities and travel to and from the activities of the group listed above. Although school transportation may be provided to and from the activities, I desire that my student participate in and travel to and/or from the activities via an alternative mode of transportation. This alternative mode is with my student’s parent or legal guardian, by use of his or her personal legal driver’s license, or through other means of travel which I have arranged and approved. Students are not permitted to ride with other students driving unless they are siblings. While Plano ISD recommends that students stay with the group whose functions they are attending, Plano ISD will attempt to accommodate parents’ requests in specific circumstances.

I fully understand and my student fully understands that transportation to and from the events attended by the group listed could create risk to the health or safety of my student. I understand that if my student leaves the group, Plano ISD will have no ability and no responsibility to protect my student. I further recognize that my student may be at risk when travelling unaccompanied by Plano ISD affiliated person(s), but I have independently evaluated my student’s ability to travel outside of the group and determined that my student is capable of making sound decisions and being responsible for the safety of their person and their belongings. I understand that Plano ISD does not recommend that a student leave the company of the group and I am opting to have my student leave the group anyway.

Accordingly, I, the undersigned, assume full and complete responsibility for any injury or accident or loss to person or property that may occur to my student while traveling to or from the activities in transportation not provided by the District. In consideration of Plano Independent School District allowing my child to participate in the activities of the above referenced group and other good and valuable consideration, the receipt of which is acknowledged, I release and waive all claims, including but not limited to those for personal injury, wrongful death, loss of property, or any other claim, that I or my student may have against the Plano Independent School District, its Board of Trustees, employees, agents, and representatives resulting, in whole or part, from my student traveling to and from the events attended by the group listed above while traveling in transportation not provided by the District, including but not limited to claims of negligence, whether sole, joint, contributory or otherwise, against the District or claims against the District arising under the Texas Torts Claims Liability Act. The release and waiver will be binding on my heirs, legatees, administrators, and assigns.

Printed Name of Parent/Guardian

Signature of Parent or Legal Guardian

Date

Printed Name of Student

Date

Note: Student Medical/Emergency Information Card must be on file in the school office.