Shakopee High School Activities Office

TRANSPORTATION WAIVER

STUDENT NAME:	
GRADE: SPORT:	LEVEL:
GAME DATE:	GAME LOCATION:
MY STUDENT WILL BE RIDING WIT	H:
I will assume responsibility and will no injury that may occur while transportin	ot hold Shakopee Public Schools liable for any accident or ag my student to or from this activity.
PARENT SIGNATURE:	
DATE:	
Failure to turn this form in for accurate that day's game. A form must be	e coach the day before the competition is scheduled. Trate bus counts may result in not being able to play in Turned in for every game if a student is not riding the To or from a competition.
	a visual and verbal recognition from the coach before the is allowed to leave the event.

Coaches: please collect the forms and use these for accurate bus counts. Forms must be kept

on file until the season is complete.