

WAIVER TO TRANSPORT MY OWN STUDENT ONLY

I would like to transport my student <u>only</u> to / from the District / school sponsored event listed below:

Student Information:		
Name:		
Grade:		
Event Information:		
Date and Time:		
Purpose:		
The undersigned agrees to defend, indemnify and hold harmless Lodi Unified School District, its school sites, its Board of Trustees, officers, agents and employees, individually and collectively, from and against all costs, losses, claims, demands, suits, actions, payments and judgments, including legal and attorney fees, arising from personal or bodily injuries, property damage or otherwise, regardless of and however caused, brought or recovered against any of the above that may arise for any reason from or during or be alleged to be caused by the undersigned's transporting their own student.		
Parent/Guardian Signa	ture	Date
Administrator Signatur	e	Date

(TEACHER SHALL CARRY THIS FORM WHILE ON FIELD TRIP)