



**Students Must Read this Waiver Before Signing:**

I, the undersigned, desire to provide transportation to myself to and from an off-site educational location. I understand that such travel may be hazardous and involve the risk of personal injury, death, as well as damage to property, when traveling to and from the off-site educational location. I further understand that there are inherent risks in motor vehicle travel, such as accidents with other drivers, existing dangerous conditions in the roadways and thoroughfare, forces of nature, and other situations not presently cognizable by the District.

I hereby assume all risks and dangers and will hold harmless Odessa R-VII School District their officers, agents, and employees and all groups and persons connected herewith, from all actions, causes of actions, suits and any claims, demands, and liabilities whatsoever, both in law and equity, and/or any of their respective officers agents, employees, in connect with providing transportation for myself to and from any off-site educational location, except in cases of gross negligence on the part of the District.

The terms hereof shall be binding on my executors, heirs, administrators, and assignees, and shall serve as a general release for me while transporting myself to and from the off-site educational location.

**SIGN FOR ASSUMPTION OF RISK, GENERAL RELEASE, AND  
WAIVER OF CLAIMS:**

Student's Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Parent's/Legal Custodian's Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_ Policy No. \_\_\_\_\_

Insurance Company Telephone No.: \_\_\_\_\_ Group No. \_\_\_\_\_