

CABARRUS COUNTY SCHOOLS
COVID-19 Transportation Waiver of Liability
2020-2021 School Year

During the COVID-19 pandemic, Cabarrus County Schools (“CCS”) will continue to offer transportation to students engaged in certain athletic and/or other extra-curricular activities that involve off-site travel to practices, competitions and/or other events. CCS realizes that some parents, in an effort to minimize the spread of COVID-19, may wish to use an alternative method of transportation for their child(ren). By signing this form, you give consent for your child to use non-CCS transportation for off-site travel related to the athletic and/or extra-curricular activity listed below.

Student Name: _____ Parent/Guardian Name _____

School: _____ Activity _____

Please indicate one or more transportation preference(s) for your Student for the activity’s season. This form should be returned to the school’s designated athletic director.

- Option A – Drive Personal Vehicle** - I hereby give my consent to allow the above-named student to travel to and from off-site practices/events in his/her own personal vehicle. **NOTE: YOUR CHILD IS NOT PERMITTED TO TRANSPORT ANY OTHER STUDENT** to or from the school, unless it is a sibling.
- Option B – Travel with Parent(s)/Guardian(s)** - I hereby give my consent to allow the above-named student to travel to and from off-site practices/events with his/her parent(s)/guardian(s).
- Option C – Carpool with a Parent of another District Student or another Responsible Adult** - I hereby give my consent to allow the above-named student to travel to and from off-site practices/events with the parent of another student in the District or another responsible adult.

ACCEPTANCE OF RESPONSIBILITY AND WAIVER OF LIABILITY

By signing this Waiver, I acknowledge that CCS accepts no responsibility or liability for my child while he/she is driving or riding in non-CCS provided transportation. I understand that there is no CCS liability insurance or vehicle insurance coverage for my child for this alternative transportation that I am choosing. I acknowledge that CCS takes no responsibility for verifying, or for failing to verify, the status of the automobile insurance for any of the drivers the undersigned Parent/Guardian/Student has/have authorized to drive the above-named student. I assume full responsibility for liability incurred and understand that the vehicle’s owner or driver’s personal insurance will be primary in case of an accident.

On behalf of myself, my minor child, our heirs, executors, administrators, and assigns, I hereby waive, release, indemnify, and hold harmless CCS, its Board, Board members, officers, directors, employees, volunteers, and sponsors from legal liability and any and all actions, suits, damages, claims or judgments for damages or expenses (including reasonable attorneys’ fees and costs), that may result from any personal injury, loss of property or property damage, motor vehicle injury, or any other claim, demand, action or right of action, of whatever kind or nature, either in law or in equity, regardless of fault, arising from or by reason of my child being allowed to use the alternative means of transportation described above.

I, the undersigned, have fully informed myself of the contents of this Waiver of Liability by reading it before signing it, with full knowledge of its significance, intending to be legally bound thereby. I represent that I am a parent or legal guardian of the minor named above (or the student him/herself, if over 18 years of age), and I hereby agree that we both shall be bound by this Waiver of Liability.

Signature of Parent/Guardian _____

Date _____

Printed Name of Parent/Guardian _____

Student Signature (if 18 years or older) _____