

HOPE PREPARATORY ACADEMY  
WAIVER AND PERMISSION TO TRANSPORT FORM

DATE: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

**PURPOSE OF TRIP:** All Field Trips, College Tours, Afternoon Bus Drop Off, To and from workout Facility

**DRIVERS:** All Hope Academy Staff Eligible to Transport and the Drivers from a Third Party Charter company hired by Hope Preparatory Academy to Transport Students.

By signing below, I give permission for my child or children to be transported in a motor vehicle driven by eligible Hope Academy Staff or Third party Charter Company hired by Hope Academy to any of the locations indicated. I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and in expected to follow the directions provided by the driver and/or other adult volunteers.

I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to wear their safety –belt while traveling;
- (2) They are expected to respect each other, the vehicle they ride in , and the people they travel with during the trip;
- (3) Riding in a motor vehicle may result in personal injuries or death from wrecks, collisions or acts by riders, other drivers, or objects; and
- (4) They are to remain in their seats and not be disruptive to the driver of the vehicle.

I understand that my child is not required to participate in this activity, but grant permission for him/her to do so, despite the possible risks. I recognize that by participating in this activity, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

Parent/Guardian Name (please print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

Administrator Signature: \_\_\_\_\_ Date \_\_\_\_\_