

# School Bus Transportation Waiver

I, the undersigned, acknowledge and accept the risks associated with school bus transportation provided by the school. I agree to release and hold harmless the school, its employees, and agents from any and all liability that may arise as a result of my child riding the school bus.

## Student Information

Student Name

Grade

School Year

## Parent/Guardian Information

Parent/Guardian Name

Phone Number

Email Address

## Waiver Agreement

I have read and understand this waiver and agree to its terms. I permit my child to use the school bus transportation service for the school year indicated above.

Parent/Guardian Signature

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Date

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