

ADMINISTRATION OFFICE  
300 ASH STREET  
CENTRAL POINT, OREGON 97502  
PHONE: (541) 494-6200  
FAX: (541) 664-1637  
[www.district6.org](http://www.district6.org)



## STUDENT DRIVEN PRIVATE VEHICLE AND/OR PASSENGER RELEASE (To be completed by Parent/Guardian and Student)

Student Driver Name: \_\_\_\_\_ School: \_\_\_\_\_

Event/Sport/Activity: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher/Coach/Advisor: \_\_\_\_\_ Time(s)/Date(s): \_\_\_\_\_

Parent/Guardian Phone Number: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

Student Driver's License No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

During the course of the school year, your student may be involved in various school sponsored events for the Central Point School District #6. There will be some events in which the District may not be providing transportation to and from the event. For those events/activities, you and/or your student will be responsible for their transportation. This form is intended to advise parents/guardians of these circumstances and seek permission to allow one or all of the transportation options listed below.

I am the parent/legal guardian of the student listed above. By signing and returning this form, I give my permission for student to travel in the manner acknowledged below, for the purpose of participating in school sponsored events (athletics, field trips, internships, etc.).

**Initial all that apply:**

- Student may travel with another licensed student. \_\_\_\_\_
- Student will drive a private vehicle but may not transport other students. \_\_\_\_\_
- Student will drive a private vehicle and may transport other students whose parent/guardian have given written consent by also completing this form. The student driver will follow all DMV laws including, but not limited to, the first six months you cannot drive with a passenger younger than 20 unless they are a member of your immediate family - For the second six months you may not drive with more than three passengers who are younger than 20 who are not members of your immediate family. \_\_\_\_\_

Other Transportation Arrangements: \_\_\_\_\_  
\_\_\_\_\_

For those driving: I volunteer to use my private vehicle to provide transportation to/from the school sponsored event(s) described above. I acknowledge and agree that I have, and will continue to maintain during the entirety of the date(s)/time frame above, valid automobile liability insurance on my private vehicle being used for such transportation covering bodily injury and property damage minimums in accordance with Oregon law (\$300,000.00 recommended) and that I am a named insured on such insurance policy. The insurance is written with the following company:

_____	_____
NAME OF INSURANCE COMPANY	POLICY NUMBER

I agree and understand that the insurance on the vehicle is primary and that I will be solely responsible for any physical damage, repairs, and maintenance (including fuel costs) to said vehicle. I acknowledge that the Central Point School District

does not provide automobile liability or physical damage insurance, including but not limited to medical or liability insurance, applicable to this transportation, and that any accidents, injuries or medical problems are strictly the responsibility of myself.

I hereby certify that I have a current and valid Oregon driver's license and I authorize the Central Point School District to obtain my motor vehicle driving record.

I acknowledge and agree that I am solely responsible for maintaining my private vehicle used to provide transportation to/from the school sponsored events described above in a safe condition and for providing the equipment necessary to ensure safe transportation during this activity (such as seat belts for each passenger, tire chains, appropriate car seats when required by law, etc.).

I hereby release and agree to indemnify and hold the Central Point School District free and harmless from and against any liability, including but not limited to property damage, bodily injury and/or personal injury, up to and including death, arising out of or relating in any way to my providing transportation to/from the school sponsored events described above. This release is intended to be interpreted and enforced to the maximum extent permitted by Oregon law.

I understand that Student's driving privileges may be suspended for not following and obeying traffic laws or proper and safe driving behaviors.

**AS A DRIVER PROVIDING MY OWN VEHICLE OR TRAVELING WITH ANOTHER STUDENT, OR PARENT/GUARDIAN GIVING PERMISSION, I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED ON THIS FORM. I VOLUNTARILY AND KNOWINGLY ACCEPT AND AGREE TO THE TERMS AND OBLIGATIONS AS SET FORTH ABOVE.**

_____	_____	_____
STUDENT NAME (please print)	SIGNATURE	DATE
_____	_____	_____
PARENT/GUARDIAN NAME (please print)	SIGNATURE	DATE

This form must be completed each year or when information provided needs to be updated.  
Please turn in to your school office or the Athletics office if appropriate.