

This form cannot be used without prior district administration approval.

Parents must be informed at the first organized meeting that SCPS will not afford transportation.

Board Policy 09.36

Waiver 3

RELEASE AGREEMENT

Shelby County Public Schools will NOT be providing transportation.

My child, _____, has decided to participate in Indoor Track & Field during the 2025-26 school year. I acknowledge that the Board of Education of Shelby County has determined that transportation will not be provided in relation to this activity, and that transporting my child is a cost and responsibility which I must accept in order for my child to participate in this activity. With knowledge of this condition, I am voluntarily giving my permission for my child to participate in this activity and I am agreeing to provide or arrange for transportation of my child. I further acknowledge that I must provide the coach the name(s) of any individual who has permission to pick my child up following any team/club activity.

I hereby release and waive, and further agree to hold harmless the Board of Education of Shelby County, its officers, employees, and agents, from and against any claim I, or as the representative of my child,

_____ who is under the age of eighteen (18), may now or hereafter have or claim to have in any court or other forum for or on account of any losses, damages, personal injuries, pain and suffering, death, or property damage resulting from or arising out of, during, or in connection with driving to and from the events relating to the activity referenced above.

This Release Agreement shall be construed to be as comprehensive as is allowed by law; as severable, the invalidity of any portion of which shall not affect any other portion; and shall not establish a legal or other relationship between or among those released which does not in fact exist.

SIGNATURE OF SCHOOL EMPLOYEE

SIGNATURE OF PARENT/LEGAL GUARDIAN

Or (if a school employee or coach does not observe the parent / guardian sign this form, the form must be notarized) DATE _____

(COMMONWEALTH OF KENTUCKY)
COUNTY OF _____) Sct.

Subscribed and sworn to before me by _____, on this the ____ day
of ____, 20__.

My Commission expires _____, 20__.

NOTARY PUBLIC