

**HIGH POINT ACADEMY
ATHLETIC TRAVEL RELEASE**

(Parents, fill out form, give to athlete's coach for approval;
If approved, turn into the Athletic Department for A.D. Approval)

This is to certify _____ has my permission to ride in a private
Student's name
vehicle to and from High Point Academy _____ athletic contest and practices.
Sport

I certify that I am personally transporting the above-named student or have arranged for transportation
with _____.
Driver Name

I agree not to assert any claims against or attempt to hold High Point Academy, or any of its agents or employees, liable for any sum which I might claim as a result of injury or property damage arising out of or caused by any accident or occurrence during the time I am transporting the above-named student or the above-named student is a passenger in a private vehicle traveling to and/or from athletic contests and practices of High Point Academy.

I understand that in the event an accident occurs while my child is being transported in the driver's private vehicle, the driver's automobile insurance carrier will be the primary coverage provider for all claims that may arise from such accident.

This form must be on file in the athletic office prior to travel

Signature of Parent or Guardian

Date

Coach's Approval Signature

Date

A.D. Approval Signature

Date