
SOUTHERN LOCAL JUNIOR – SENIOR HIGH SCHOOL

ATHLETIC DEPARTMENT

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Salineville, OH 43945
Telephone: 330-679-2305

Thomas Cunningham
Superintendent

Jay Kiger
Principal

Ron Sines
Assistant Principal

Robert Shansky
Athletic Director

PARENT / LEGAL GUARDIAN TRANSPORTATION WAIVER

As a matter of policy to promote team cohesion, transport to and from ALL athletic events shall be provided by the Southern Local Board of Education approved transportation only. Teams should travel to an event as a team and return as a team, rather than as individuals. Recognizing that **UNUSUAL CIRCUMSTANCES** may occur, permission may be approved on an individual basis by the Junior-Senior High School Administration for a student-athlete to travel to or from an event with a parent/legal guardian. These cases are to be exceptions for special circumstances and should not be approved a general rule.

In order for a student-athlete to be excused to travel with a parent/legal guardian:

1. This Transportation Waiver must be signed by a parent/legal guardian in the presence of a coach or administrator, to remain on file in the athletic office for the remainder of the school year.
2. Evidence must be presented showing proof that the vehicle and driver are covered for liability, medical payments, physical damage, and uninsured motorist liability.

A written request must be presented to an administrator before a student-athlete will be excused to travel with a parent/legal guardian.

I _____, parent of student-athlete _____
(PRINT PARENT/LEGAL GUARDIAN NAME) (PRINT STUDENT NAME)

do hereby agree to hold the Southern Local Board of Education and any of its personnel harmless, and not responsible in any manner, if I transport my son/daughter to or from an Athletic Event in accordance with the guidelines above and/or any modifications as approved by the Junior-Senior School Administration. I agree to assume any and all liability for such transportation gully acknowledging that any insurance or liability coverage of the Southern Local Board of Education and its employees or the Ohio High School Athletic Association (including the OHSAA Lifetime Catastrophe Accident Insurance Policy) shall be null and void due to my actions.

I further agree that I will not transport any student athlete under this agreement other than my son or daughter.

(PARENT/LEGAL GUARDIAN SIGNATURE)

DATE

(ADMINISTRATIVE WITNESS)

DATE