



Permission Form and Liability Waiver

I _____, the parent/guardian of _____, give permission for my child to be transported in a motor vehicle driven by an approved Lincoln Christian Parent Volunteer. I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and is expected to follow the directions provided by the driver and/or other adult volunteers.

I understand that personal injury and or permanent loss can and may occur to my child, and I hereby authorize the Lincoln Christian Parent Volunteer to seek and consent to emergency medical attention for my child as needed; and I further agree to be liable for and to pay all costs incurred in connection with such medical attention.

I hereby release Lincoln Christian School, its employees, agents and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury that may be sustained by my child while participating in or traveling to and from this event.

I agree and consent to all of the above stated.



(Parent Signature)

(Date)



(Parent Signature)

(Date)