

Fine Arts Department
Hamilton City Schools

PARENT CONSENT FOR Transportation
BY ANOTHER PARENT

I have reviewed the following information and consent for my child to participate in described activity and to be transported by private vehicle for this purpose. Further, I hereby release the Hamilton City School District, its transportation services, and any and all of its personnel from any and all responsibilities for transporting my child/children to and from this activity.

Purpose of the Trip TAG DAY/CALENDAR FUNDRAISER - BAND

Date of the Trip SATURDAY, NOVEMBER 18, 2006

Time of Departure **12:30PM** Time of Return to School **3:00PM**

Owner of Vehicle BAND PARENT VOLUNTEERS

Driver of Vehicle BAND PARENT VOLUNTEERS

Description of Vehicle PRIVATE-OWNED VEHICLE

The school verifies that the driver has a valid operator's license, the vehicle is in proper operating condition, and a safety belt will be available for your child.

Name of Student

Signature of Parent/Guardian

Grade

Date Signed