

*"District and Community committed to working together to provide educational excellence and support our students for their future."* 

## PERSONAL LIABILITY RELEASE FORM

Ι\_\_\_\_\_,

\_\_\_\_\_, certify that I am personally transporting \_

(Parent / Guardian)

(Name of Student)

I AGREE TO RELEASE PIPESTONE AREA SCHOOLS and its employees from any and all liability in transporting the above-named student. I acknowledge that I have auto insurance and a valid driver's license.

(Signature of Parent/Guardian Transporting Student)

(Signature of Coach/Advisor)

Date: \_\_\_\_\_

"Inspire life-long learners. Build Character. Prepare them for their future."