Student Transportation
Waiver

As the parent/guardian of __________________ a _______ grade student
(Student’s name) (Grade)

At Spring Hill Independent School District and participant in _________________
(Activity)

I give my permission for him/her to use transportation, other than school provided
transportation, to travel to and from this school activity. I give my permission for
him/her to be transported by ____________________________.
(Driver’s Name)

I hereby release and fully forever discharge Spring Hill Independent School District, and all of its
administrators, teachers and staff, supervisors, and agents, from liabilities, claims,
demands, suits and causes of action of every kind in any way relating to or arising out of
his/her participation in the above activity.

________________________________________  ___________________________
(Signature of Parent/Guardian) (Date)

________________________________________
(Signature of Teacher) (Date)

________________________________________  ___________________________
(Signature of Driver) (Date)