OHIO STATE UNIVERSITY EXTENSION

Waiver and Permission to Transport Child/Charge Ohio State University Extension

Child/Charge:		
Event:		Date:
Location:	•	
Driver:		
individual id my child is expected to understand t	dentified to an event at the specified lo expected to follow all applicable laws follow the directions provided by the	be transported in a motor vehicle driven by the cation on the date indicated. I understand that regarding riding in a motor vehicle and is driver and/or other adult volunteers. I at is not a requirement for participation in the
(1) 7 (2) 7 (3) 1	safety-belt while traveling; They are expected to respect each othe travel with during the trip; Riding in a motor vehicle may result in collisions or acts by riders, other drive	cle driven by an adult and they are to wear their or, the vehicles they ride in, and the people they a personal injuries or death from wrecks,
transportation that I have be this activity.	on, my child may risk personal injury of seen advised of the potential risks, that	with any activity involving motor vehicle or permanent loss. I hereby attest and verify I have full knowledge of the risks involved in may be incurred in the event of an accident, I have authorized such expenses.
further agree The Ohio St any claim th damages, de arising out of	e to release and forever discharge The tate University Extension and their age tat I might have myself or that I could emands or actions whatsoever, including	or myself, my child, my executors and assigns, Ohio State University, its Board of Trustees, ents, officers, employees and volunteers from bring on my child's behalf with regard to any ng those based on negligence, in any manner entire waiver and permission form, fully terms.
Parent/Guar	dian Name (please print):	
Parent/Guar	dian Signature:	Date:



