



Imagine what you can learn!

STUDENT RIDER PERMISSION FORM

I, as parent or legal guardian, do hereby give my permission for _____
Athlete's Name (please print)

to ride with _____ to the following athletic event:
Driver's Name (please print)

Athletic Contest or Practice

taking place at _____ on: _____ for: _____
Location Date School

I do not hold the school or Vancouver School District responsible for transporting my athlete. It is my responsibility to verify that the driver is licensed, insured, and safe. It is also my responsibility to verify who else will be in the car. I understand that the parent or legal guardian of the student driver must complete a Student Driver Permission Form.

Parent or Legal Guardian

Date

Printed Name

Rev. Feb 2013

Vancouver Public Schools

2901 Falk Road • Vancouver, WA 98661

PO Box 8937 • Vancouver, WA 98668-8937

Phone: 360-313-1000 • Fax: 360-313-1001 • www.vansd.org