

**AUSTIN INDEPENDENT SCHOOL DISTRICT
PRIVATE TRANSPORTATION PERMIT**

We (I) are the parents (legal guardians) of _____, a child enrolled in the Austin Independent School District.

We (I) hereby grant permission for the student named above to travel by a vehicle driven or operated by an employee of the School District acting within the scope of his or her duties, or gratuitously by individuals, or by an independent contractor. This transportation may be a privately owned vehicle or a privately owned chartered bus.

We (I) accept responsibility to determine that the transportation provided is safe and reasonable for the purposes intended. We (I) agree that the Austin Independent School District, its officers, trustees and employees are not negligent in their choice of the transportation and that we (I) have freely chosen the transportation provided herein. We (I) understand that we have the option to provide our own transportation method.

We (I) hereby waive, release and discharge the Austin Independent School District, its trustees, officers and employees from any claim, demand or cause of action arising out of the transportation herein provided and agree to indemnify and save harmless the Austin Independent School District and its employees from all claims for loss, damage or injury sustained by us (me) or by our (my) child whether the same be caused by the negligence of the Austin Independent School District or its officers, agents, employees, or otherwise.

Parent

Date

Student (if 18 years of age or over)

Date

(To be used for field trips, extracurricular activities and other events during which students travel in privately owned vehicles driven or operated by Austin Independent School District employees other individuals, or independent contractors).

**James Bowie High School
Boys Lacrosse Photo Release**

I, consent that the photographs, audio and video submitted and/or recorded by the James Bowie High School Boys Lacrosse Organization may be used by the James Bowie High School Boys Lacrosse Organization whichever way they desire, including CD-ROMs, web page, publications, and any other form for the storage, retrieval and reproduction of information, images; furthermore, I hereby consent that such information, photographs, videos, and/or audio tape recordings from which they are made shall be their property, and they shall have the right to make other uses of such information, photographs, videos, and/or audio tape recordings as they may desire free and clear of any claim whatsoever on my part.

Player Name

Age

Uniform #

Date

Phone Number

Print Name of Parent/Guardian

Signature of Parent/Guardian

Street Address

City, State, Zip Code