Students should complete this form when not using the scheduled bus or car pool, and when they will be returning from a contest not with their parent.

Athletics/Activities Transportation Consent Form

Peak to Peak Charter School 800 Merlin Drive, Lafayette, CO 80026 303.453.4601
PEAK TO PEAK CHARTER SCHOOL
STUDENT DRIVING THEMSELVES TO CONTEST
I hereby permit to be transported to
(student's name)
in a private vehicle,
(athletic activity/event)
on
1. I understand that the athletic activity/event may take place away from school property; may involve transportation by school bus, private vehicle, common carrier or other mode of transportation; and may involve activities beyond the scope of traditional school functions conducted on school property.
2. I acknowledge that my student's participation in these athletic activities potentially involves risks and obligations that are impossible to predict, but may include the risk of loss or damage to personal property and the risk of sickness, personal injury or death.
3. I understand that Boulder Valley School District does not purchase, or have, any medical, dental or hospitalization insurance to cover injuries to or loss of life of pupils or to indemnify parents and guardians for expenses in connection therewith, and that such insurance, if desired, must be purchased by me. Peak to Peak's student accident policies do offer limited medical, dental and loss of life coverage, however, this is secondary to the students' own coverage.
4. I understand that Peak to Peak Charter School and Boulder Valley School District do not carry insurance for private vehicles or drivers. All Drivers must meet <i>Insurance requirements</i> of the State of Colorado. In addition, the Board requires liability insurance coverage in the amount of \$100,000/\$300,000. Evidence of such coverage must be received by the school Athletics and Activities Director prior to vehicle use.
Date Parent or Guardian PRINTED NAME
Parent or Guardian SIGNATURE
PLEASE RETURN THIS PERMISSION FORM TO YOUR STUDENT'S COACH OR TO THE ATHLETICS
AND ACTIVITIES DIRECTOR PROMPTLY

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__ Phone Number:_

Daniel Seidman, Athletics and Activities Director, 303-453-4794, Daniel.Seidman@bvsd.org TO BE USED FOR LOCAL AND METRO AREA SHORT TRIPS. FORM IS TO BE COMPLETED AND SIGNED BY PARENT.