



**Lincoln Consolidated Schools  
Athletic Transportation Waiver  
2018/2019**

My athlete: \_\_\_\_\_ has permission to travel in

a private vehicle driven by \_\_\_\_\_ on the planned  
name of driver

athletic events for \_\_\_\_\_.  
team and dates

I understand the school does not carry insurance covering the driver of the student.  
I will not hold the school liable for accident or injury on the trip.

\_\_\_\_\_  
Parent/Guardian Approval

\_\_\_\_\_  
Date

\_\_\_\_\_  
Athletic Director Approval

\_\_\_\_\_  
Date