



**WAIVER AND PERMISSION TO TRANSPORT CHILD
VISIONS OF TRUTH COMMUNITY DEVELOPMENT CORPORATION
Students Taking Responsibility in Valuing Education
STRIVE PROGRAM**

Participant's Name: _____ DOB: _____

Address: _____

School: _____ Grade: _____ Age: _____

Parent /Guardian Name(s): _____ Phone: _____

Emergency Contacts: _____ Emergency Phone: _____

I give permission for my child to be transported in a motor vehicle driven by a program staff member while participating in STRIVE PROGRAM activities, Monday through Friday for the duration of the program. I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and is expected to follow the directions provided by the driver and/or other adult volunteers.

I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to wear their safety-belt while traveling;
- (2) They are expected to respect each other, the vehicles they ride in, and the people they travel with during the trip;
- (3) Riding in a motor vehicle may result in personal injury or death; and
- (4) They are to remain in their seats and not be disruptive to the driver of the vehicle.

I recognize that by participating in this activity, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

As a condition for the transportation received, I, my child, my executors and assigns, further agree to release and forever discharge Visions of Truth Community Development Corporation, its Board of Trustees, The STRIVE PROGRAM and their agents, officers, employees and volunteers from any claim I could bring on my child's behalf with regard to any damages, demands or actions whatsoever, including those based on negligence, in any manner arising out of this transportation. I have read this entire waiver and permission form, fully understand it, and agree to be legally bound by its terms.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____