

Victory Christian Academy Student Driver/Passenger Waiver

Athletic Event: _____

Date: _____

Student Driver: _____

Student Passenger: _____

DRIVER

I, _____ (parent of driver) give my son/daughter _____ (name of student driver) permission to transport other students to/from the above-mentioned athletic event. I acknowledge that my child holds a valid driver's license which has been effective not less than 180 days, and at the time of transport has a clean driving record as outlined on the attached driver information form.

PASSENGER

I, _____ (parent of passenger) give my son/daughter _____ (name of passenger) permission to ride solely with the student driver listed above, for the event listed above.

I acknowledge that participation in the activity described above involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the activity described above (the "activity"), the passenger (or parent/guardian if the passenger is a minor) acknowledges and accepts the risks of injury associated with transportation to and from the activity. The driver (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during transportation to and from the activity, as well as for any medical treatment rendered to the passenger. Further, both the driver and passenger (or parent/guardian) releases and promises to indemnify, defend, and hold harmless Victory Christian Academy for any injury arising directly or indirectly out of the transportation to and from the activity described above, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the driver/passenger (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the driver/passenger (or parent/guardian) and the activity sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution in accordance with the rules of the American Arbitration Association.

Parent Signature

Date

Student Signature

Date

Victory Christian Academy
Driver Information Form

Driver's name (as shown on license): _____

Date of birth: _____

Driver's license state and number: _____

In the past three years:

- | | | |
|--|-----|----|
| 1. Have you been at fault for any accidents? | Yes | No |
| 2. Have you had any moving traffic violations? | Yes | No |
| 3. Have you had any insurance company cancel or refuse to provide you with auto insurance? | Yes | No |
| 4. Have you had your driver's license revoked, suspended, or restricted? | Yes | No |
| 5. Have you had any physical impairments other than corrective glasses? | Yes | No |
| 6. Have you ever been charged with or convicted of "driving while intoxicated" or "driving under the influence"? | Yes | No |

If any question(s) 1–6 have been answered with "yes," please provide full details below: (dates, descriptions, amounts, or other explanation)

Signature

Date