



# STUDENT WITH PARENT RIDER FORM

## PARENTAL AUTHORIZATION & ACKNOWLEDGEMENT OF RISK ATHLETIC PROGRAM

### STUDENT RIDING WITH ANOTHER PARENT

I, \_\_\_\_\_, give permission for my son/daughter, \_\_\_\_\_,  
(Printed Parent Name) (Printed Student Name)  
 to be a passenger in a vehicle operated by another parent (designated driver), for the purpose of driving to and from athletic practices, competitive meets, and/or team functions during the \_\_\_\_\_ sport season.  
(i.e. 2021 School Year)

### STUDENT AGREEMENT

While participating in this program, I will accept responsibility for maintaining good conduct and appearance, and I will follow directions at all times.

### GENERAL INFO

I understand that participation in this program is voluntary, that it is not required, and that it exposes my child to some risk(s). I also understand that participation in this program will involve activities off school property; therefore, neither the Fairfax County School Board, or its employees and volunteers, will have any responsibility for the condition or use of any non-school property.

I further understand that this permission may be revoked at any time by contacting the Head Coach or the Director of Student Activities, at \_\_\_\_\_ School.

#### IMPORTANT

No parent can be a designated driver without the completion of the form, FS-142 Field Trip Driver's License and Vehicle Insurance Information by the designated driver. The personal vehicle liability insurance of the owner/driver will be the primary coverage in the event of an accident.

Signed \_\_\_\_\_  
Student Signature

Date \_\_\_\_\_

Signed \_\_\_\_\_  
Parent Signature

Date \_\_\_\_\_