

NORTH MARION HIGH SCHOOL 20167 GRIM RD. NE AURORA, OREGON 97002 (503) 678-7123

CHERYL STROUD
DIRECTOR OF TEACHING AND LEARNING

DE ANN JENNESS PRINCIPAL GLENN ELLIOTT
INTERIM VICE PRINCIPAL/ATHLETIC DIRECTOR

During the course of the school year, your child may be involved in various activities sponsored by the North Marion High School where school provided transportation has a conflict. In the event that private transportation is necessary, please complete the following form that: (a) requests that you or your student be allowed to act as a volunteer driver of other students; (b) student will drive ONLY him/herself or others; (c) releases the District from liability arising out of students being transported in privately owned vehicles, and (d/e) requests that your student be permitted to be a passenger in a privately operated vehicle,

A: VOLUNTEER DRIVER INFORMATION	ON:	
Driver's Name (as it appears on Driver's License)	DOB	Driver's License #, State & Expiration
Driver's Phone Number	Driver's Home Address	
Auto Insurance Company and Phone Number		Policy Number and Expiration Date
B: Volunteer Driver will drive: (circle one) sel	If ONLY or self and other stu	dents.
Passenger name(s):		
activities. I request that the above-named indiv transportation by school officials. I hereby relea employees, and board members, from liability	vidual be allowed to transport s ase, hold harmless, defend and in arising out of personal injuries a	If and all passengers I transport to and from school tudents to and from activities sanctioned for private demnify the North Marion School District, its agents and/or property damage resulting from or in any way that 1 have carefully read and understand the terms.
Name of Adult Driver or Parent/Legal Guardia	an of Driver (Print)	_
Signature of Adult Driver or Parent/Legal Guar	rdian of Driver	Date
D: PASSENGER INFORMATION FOR I	PRIVATE TRANSPORTAT	ION
Name of Student	Address	Telephone No.
District, its agents, employees, and board mem	als. hereby release, hold harmles abers, from liability arising out o	rivately operated vehicle to and from activities as, defend and indemnify the North Marion School of personal injuries and/or property damage resulting ng below, I affirm that I have carefully read and
Name of Parent or Legal Guardian (Print)		
Signature of Parent or Legal Guardian		Date