

PART I: To Be Completed by Student

Student Name _____ Date ____/____/____
Last First MI

School _____ Grade _____

Date(s) to be excused from classes: ____/____/____, ____/____/____, ____/____/____ From ____:____ To ____:____
a.m./p.m. a.m./p.m.

Reason (describe activity) _____

For transportation in connection with this activity I will: (check one)

- Use public transportation facilities Ride in a car driven by a fellow student. Name of Driver _____
- Drive my own or my parents'/guardians' car with no passengers. Other (specify) _____
- Drive my own or my parents'/guardians' car with _____ (number) passengers.

PART II: To Be Completed by Principal/Designee

The student named above may be excused to engage in the activity described above.

The activity is is not school-sponsored. School Staff Sponsor (if applicable) _____

The attendance will be recorded as: Present Absent (*other codes are also used*)

_____/_____/_____
Signature, Principal/Designee Date

PART III: To Be Completed by Parent, Legal Guardian, or Eligible Student

Read carefully before signing. The Board of Education of Montgomery County and its servants, agents, and employees does not insure transportation as described in PART I. The school system does carry liability insurance, which, under terms of the coverage, may apply to a school-sponsored activity. In no case would coverage be provided for activities designated as non-school-sponsored. The owner of the vehicle must carry bodily injury insurance of \$100,000 per individual or \$300,000 per accident.

I as parent (or legal guardian) of the student named above, or as eligible student, give permission for the named student to be transported in the manner described in PART I.

I as parent (or legal guardian) of the student named above, or as eligible student, give permission for the named student to participate in the above-described activity.

I release, acquit, forever discharge, and agree to and do indemnify and save harmless the Board of Education of Montgomery County and its servants, agents, and employees from any and all future liability resulting from any and all claims or causes of action which I now or may in the future have for personal injuries, damage to property, loss of services, medical expenses, and losses or damages of any and every kind whatsoever that may arise from the transportation to and from the activity described above. If this is a non-school-sponsored activity, I understand that this release also applies to participation in any non-school-sponsored activity.

PARENT FINANCIAL RESPONSIBILITY

The Montgomery County Public Schools (MCPS) and _____ School wish to advise parents and guardians of the potential financial responsibility they may incur in the event that the activity named above is cancelled, delayed, interrupted, or revised.

A decision may be made by the school or by MCPS, in accordance with the MCPS School Travel Policy, to cancel the trip for safety or other reasons. In the event of such a cancellation, the trip operator's cancellation policies, as well as those of the hotels, bus companies and others providing services in connection with the trip, will determine the amount of any refund to which you are entitled, if any. This will depend upon the date any cancellation occurs. As you would expect, the closer to the date of the trip that a cancellation occurs, the more likely you will receive a smaller refund due to non-refundable payments made by the trip operator to others on your behalf. Please note that, while trip operators generally will make every effort to minimize your financial exposure in the event of a cancellation, we are unable to anticipate the amount of any refund at this time should the trip be cancelled.

In addition, please be advised that, for safety or other reasons, the trip may be delayed or interrupted once it is underway. In that event, it may be necessary for students to remain away for an extended time, thereby incurring additional room and board costs. It may also be necessary to modify itineraries or other travel arrangement, thereby requiring additional transportation costs. Neither

MCPS nor _____ School will be responsible for any additional costs that may be incurred as a result of any delay, interruption or revision to the trip.

By signing below, parents and guardians acknowledge they have read this notice and accept responsibility for any loss of trip fees due to cancellation and any potential additional costs that may be incurred as a result of any delay, interruption or revision to the trip.

_____/_____/_____
Signature, Parent, Legal Guardian, or Eligible Student Date