

PICKENS COUNTY COLLEGE & CAREER CENTER
99 COMMERCE AVE. – BOX 387
CARROLLTON, AL 35447
205-367-1230 FAX 205-367-1122
MR. SHAWN MCDANIEL, CAREER TECHNICAL DIRECTOR-PRINCIPAL

RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT. FOR THE 2021-2022 SCHOOL YEAR. REQUESTING PERMISSION FOR A STUDENT TO DRIVE A MOTOR VEHICLE, **AND OR TRANSPORT STUDENTS IN A MOTOR VEHICLE **AND OR** BE A PASSENGER IN A MOTOR VEHICLE DRIVEN BY ANOTHER STUDENT.**

The undersigned (**Student Name**) _____ (hereinafter **Student**) and (**Parent or Guardian Name**) _____ (hereinafter **Parent/Guardian**) request the Pickens County Board of Education, Superintendent, Principals and other agents, servants or employees of The Board (hereinafter collectively referred to as **School System**) to grant permission so that **Student** may be allowed to drive a motor vehicle and or transport student passengers in a motor vehicle and or be a student passenger in a motor vehicle between the home school to and from the Pickens County College & Career Center.

IT WILL BE THE SOLE RESPONSIBILITY OF THE STUDENTS' PARENTS/GUARDIAN TO MAKE THE ARRANGEMENTS.

The undersigned expressly authorize such travel and represent to **School System** that **Student** has in effect a valid driver's license issued by the State of Alabama allowing **Student** to drive which is neither suspended nor revoked. Also, there is in full force and effect a policy of liability insurance covering such motor vehicle in such amount as required by the State of Alabama. Such insurance (or comparable policy) will be kept in effect so long as **Student** remains enrolled in the Pickens County School System. **Attach a CURRENT-NOT EXPIRED photocopy of Student's driver's license and insurance card or other proof of liability coverage.**

In the event of suspension, cancellation or revocation of either the driver's license or insurance policy, the undersigned shall immediately notify **School System**. In such event, any permission granted by School System to **Student** shall immediately terminate.

The undersigned voluntarily release and waive any and all claims against **School System**, both present and future, arising out of or in any way connected with **Student's** use of a motor vehicle pursuant to this authorization including, but not limited to, claims for breach of contract, express or implied, or for acts or failure to act, or wrongful death. The undersigned do hereby release, waive and discharge **School System** and covenant that they will not institute any suit, claim, or action against **School System** for any loss, damage, or injury, to person or property, arising out of **School System's** grant of permission to **Student** to drive a motor vehicle, whether such is caused by the **Student**, **School System**, or a third party. The undersigned also agree to indemnify and save harmless the **School System** against any and all claims for damages, loss or injury, costs or expenses, including reasonable attorney's fees, that arise out of , or are made as a result of, **Student's** use of a motor vehicle pursuant to this request.

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The undersigned have read and voluntarily executed this document, including release, waiver of liability, and indemnity agreement. No oral representations, statements, or inducements apart from this written document have been made. We agree that this request is voluntary and the undersigned assume all risks of loss, damage, or injury that might be sustained as a result of **Student's** operation of a motor vehicle pursuant to permission granted by **School System**.

The undersigned agree that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Alabama, and that if any portion is held invalid, the remaining provisions shall continue in full force and effect.

COMPLETE ONLY THE SECTION(S) THAT APPLY

1*MY STUDENT IS AUTHORIZED TO DRIVE A VEHICLE TO THE CAREER CENTER:

Dated, this the _____ day of _____, 20_____

Student Driver Signature _____

Parent/Guardian of **Student** Driver _____

2*MY STUDENT MAY TRANSPORT OTHER AUTHORIZED STUDENTS IN A VEHICLE:

Dated, this the _____ day of _____, 20_____

Student Driver Signature _____

Parent/Guardian of **Student** Driver _____

3*MY STUDENT MAY BE A PASSENGER IN ANOTHER AUTHORIZED STUDENT'S VEHICLE:

Dated, this the _____ day of _____, 20_____

Student Passenger Signature _____

Parent/Guardian of **Student** Passenger _____

**ATTACH A PHOTOCOPY OF CURRENT PROOF OF
INSURANCE AND DRIVER'S LICENSE**