



For use on out-of-county activities and events when transportation is organized by County Extension Office, yet the 4-H'er is arriving separately from county organized transportation.

4-H'er Name	County	Age
Activity/Event	Date(s) of Act./EventStart Time	AM/PM

PLEASE INITIAL BY THE APPROPRIATE SELECTION FOR TRANSPORTATION METHOD

_____DRIVING SELF: I give permission for my child to drive him/herself I understand that my child will not be permitted to drive during the event and that keys may be collected by the coordinator once the automobile is parked in the designated location. By my initials I certify that my child has a valid driver's license and auto liability insurance.

_____DRIVING SELF & OTHERS: I give permission for my child to drive him/herself and the following 4-H'ers, and permission has been obtained from their parents/guardians:

_____I understand that keys may be collected by the activity/event coordinator, and that my child will not be permitted to drive during the activity/event, once the automobile is parked in the designated location. By my initials I certify that my child has a valid driver's license and auto liability insurance.

_____RIDING WITH ANOTHER 4-H'ER/ADULT: I give permission for my child to ride with the following 4-H'er/ adult ______, who will be driving to the above 4-H function. I understand the route and stops they will be making. If applicable, I understand the following people will also be in the automobile with my child and the driver: ______

_____RIDING ALTERNATE TRANSPORTATION SUCH AS RIDESHARE/PUBLIC TRANSPORTATION: I have arranged for my child to be transported by alternative transportation, such as public transportation or rideshare program. I understand and accept any risk involved with said transportation. These travel arrangements are not the responsibility of Georgia 4-H. It is my responsibility to arrange and pay for said transportation.

PLEASE ALSO INITIAL BY THE APPROPRIATE SELECTION FOR ARRIVAL TIME

_____My child will arrive at the regularly scheduled start time

_____My child will arrive at a different time than the scheduled start time. Expected arrival time is: ______AM/PM

REQUIRED SIGNATURES

Printed name of parent/guardian giving permission

Signature of parent/guardian giving permission

4-H Extension Contact aware of arrangement

Date

Phone number of parent/guardian

Date

4-H Extension Contact signature

Comment/Notes: ____

Phone number of 4-H Extension contact

*Please complete both sides, sign, and return form to 4-H contact. *

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I, ______, in consideration of being granted permission to travel by means other than official 4-H transportation on this date _______ to/from (select one or both) the : _______ hereby waive any and all claims for damages or loss to my person or property which may occur while traveling separately. I hereby release the Board of Regents of the University System of Georgia, the University of Georgia, the University of Georgia Cooperative Extension, Georgia 4-H, and ______ County 4-H, and staff members ("Releasees") and agree to indemnify and hold harmless the Releasees from and all liabilities, losses, damages, costs, and expenses (including attorneys' fees) arising out of my travel by means other than official transportation. I understand and acknowledge the risks inherent is such travel, including the risk of injury or death, and I assume such risks.

This general release for travel and waiver of liability is binding on my heirs and assigns.

Signature of Student:	Date:	
- 0		

Signature of Parent/Guardian:	Date:
- 0	