

Shuttle Service Waiver Form

Student Information:

- Student's Full Name: _____
- Date of Birth: _____
- Parent/Guardian Name: _____
- Contact Phone: _____
- Emergency Contact Name & Phone: _____

Shuttle Service Details:

- Pick-Up Location: _____
- Drop-Off Location: _____
- Service Provider (if applicable): _____ **Raptors Soccer** _____

Waiver and Release of Liability

I, *[Parent/Guardian Name]* _____, hereby give permission for my child,
[Student's Name] _____, to use the shuttle service provided by **Raptors Soccer**.

I understand and acknowledge the following:

1. The shuttle service is a convenience and involves inherent risks, including but not

limited to transportation accidents, delays, or unforeseen incidents.

2. My child is expected to follow all safety rules and behave appropriately while using the shuttle service.
3. The shuttle service provider and/or organization are not liable for any injuries, damages, or losses that may occur during transit.

By signing below, I release ***Raptors Soccer***, its staff, and drivers from any liability arising from my child's participation in this shuttle service.

Parent/Guardian Signature: _____

Date: _____