

DEPARTMENT OF ATHLETICS

Durham College

VARSIY TRANSPORTATION WAIVER

Date: _____, 20 _____

I, _____ will be _____
(Name)

(Check Box)

A. Arranging my own transportation to and from the following varsity game/event.

B. Arranging my own transportation to the following varsity game/event but will be travelling with the team on the way home.

C. Travelling with the team but will be arranging my own transportation home from the game/event.

SPORT	DATE(S) of GAME/EVENT	DESTINATION
_____	_____	_____
_____	_____	_____

I understand that I absolve Durham College of any and all responsibilities. I hereby release, waive and discharge the Board of Governors of Durham College officers, employees and voluntary officials of and from all claims, demands, damages, actions and causes of action, in respect to death, injury, loss of damage, to my person or property.

Head Coach Signature

Date:

Athlete Signature

Date:

Director of Athletics/Authorization or Representative

Date

This form must be submitted with athlete and coach signature no later than **24 hours** before departure.