

Student: _____

BELLINGHAM PUBLIC SCHOOLS
Bellingham, Washington
Student Driving Authorization Form

Bellingham Public Schools may offer off-campus activities for students. If transportation is not provided by the district, a student may be allowed to drive to the activity, but only if this form is on file at the school.

The student driver identified below may only allow other students to ride with him/her if:

1. The driver's parent/guardian has so indicated below, AND
2. The rider's parent/guardian has signed a **Student Rider Authorization Form**.

To be an eligible STUDENT DRIVER, the student must:

*Have a valid Driver's License (Attach a photocopy).

*Have had no moving violations in the State of Washington in the past three (3) years.

*Have insurance in the minimum amounts of \$100,000/\$300,000 (Attach a photocopy of insurance form).

*Have an automobile in good working order and with operable seatbelts.

*Obey all traffic laws.

The undersigned parent/guardian hereby consent or agree that all of the above conditions have been met, that their child (student) is permitted to drive to this student activity and hereby agree to the terms and conditions set forth in this Student Driving Authorization Form. Current automobile liability insurance will be in force at all times during program participation. Your insurance will be the primary coverage in the event of any liability arising out of this activity. It should be further understood that the district's coverage may or may not respond, but, in any event, only in excess of any valid, collectible insurance; and the district's insurance will not respond to damage to the vehicle itself under any circumstances.

Student Name: (Please print) _____ Grade Level: _____

Student Signature: _____

I do agree to allow my student to have other riders in my vehicle.

I DO NOT agree to allow my student to have other riders in my vehicle.

Parent/Guardian Signature: _____ Date: _____

Work Phone: _____ Home Phone: _____

Alternate Contact Person: _____

Work Phone: _____ Home Phone: _____

My student has permission to drive the following insured family vehicles:

COPIES TO: Teacher or Project Advisor
Student/Parent