

ACTON-BOXBOROUGH REGIONAL SCHOOL DISTRICT



TO: ALL COACHES

FROM: STEVE DESY

RE: ATHLETIC TEAMS DRIVING IN PRIVATE VEHICLES

If it becomes necessary for members of your team to use private vehicles for transportation to any events, please have their parents/guardians fill out on of the attached forms and return to you. This must be done before they will be allowed to drive/ride in private vehicles.

ACTON-BOXBOROUGH REGIONAL SCHOOL DISTRICT

USE OF PRIVATE VEHICLES FOR ATHLETIC TRANSPORTATION

Please complete, sign and return this form to the High School Principal.

Name of Driver _____ Telephone _____

Address _____ Town _____

Do you have a valid driver's license? _____

Owner's Name (if different) _____

(Please check if statement is correct.)

_____ The owner of the vehicle has liability insurance of at least \$250,000/\$500,000 which is effective even if the driver is other than the owner.

_____ The owner of the vehicle has a valid registration.

_____ The vehicle has an up-to-date inspection sticker.

_____ The vehicle is equipped with seat belts.

If the driver is not the owner of the vehicle to be used on the field trip, please complete the following authorization statement:

_____ has my permission to use my vehicle to drive students to and
(name of driver)

back from _____ on _____
(destination) **(date)**

I have ascertained that he/she has a valid driver's license and is covered under my liability insurance.

(Signature of Owner of Vehicle)

ACTON-BOXBOROUGH REGIONAL SCHOOL DISTRICT

ATHLETIC TRANSPORTATION POLICY

When it is necessary to provide transportation in private vehicles, the following School Committee policy will be observed at all times:

1. The driver has a valid driver's license and liability insurance of at least \$250,000/\$500,000.
2. The driver is authorized to use the vehicle proposed.
3. The vehicle has a valid registration and inspection sticker and is equipped with seat belts.
4. All people who will be passengers in such vehicles have completed the release form provided below.

_____ has my permission to ride to and from practices and/or
(Student's Name)

when necessary, in a private vehicle which meets the standard indicated above.

DATE

PARENT OR GUARDIAN