

TRANSPORTATION FOR MINOR

This form must be completed and returned to the camp director prior to the program start date.

Camper's Last Name: _____ First Name: _____

Program Attending: _____

Please select the transportation option below (A, B or C) that your minor will be using during the camp, and acknowledge with signature in according section.

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OPTION A -- Parent/Guardian Information Drop-Off/Pick-Up

Please list who are authorized to pick-up/drop-off the above-mentioned minor. The driver is required to show photo identification to designated program personnel upon arrival.

| Name | Phone Number | Driver's License # REQUIRED | Expiration Date | Address |
|------|--------------|--------------------------------|-----------------|---------|
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I hereby give my permission for above-listed people to drop-off and/or pick-up my child during the duration of the program.

Parent/Guardian Print Name: _____

Signature: _____ Date: _____

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OPTION B – Minor Permitted to Walk/Bike/Bus/Fly

I hereby authorize and consent for my child to be released from the program without parental/guardian supervision and further hereby allow my child to walk, bike, take bus and/or fly when departing the program.

I hereby acknowledge and accept all risks individually and/or on behalf of my minor child, and I hereby release The University of Texas at Arlington, its governing board, officers, employees and representatives from any and all liability to my child, my child's personal representatives, estate, heirs, next of kin and assigns for any and all illness or injury to my child's person, including his/her death, that may result from or occur during my child's walk, bus ride, bike, or fly to and from the camp without parental or guardian supervision, whether caused by negligence of The University of Texas at Arlington, its governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless The University of Texas at Arlington and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from my child's negligence or intentional act or omission.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR MY CHILD'S INJURY OR DEATH OR DAMAGE TO MY

CHILD'S PROPERTY THAT OCCURS WHILE WALKING, BUSING, BIKING, OR FLYING TO AND FROM THE UNIVERSITY OF TEXAS AT ARLINGTON CAMP/PROGRAM AND I AGREE TO INDEMNIFY THE PARTIES NAMED FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY MY CHILD'S NEGLIGENCE OR INTENTIONAL ACT OR OMISSION.

The University of Texas at Arlington will not take custodial responsibility of the minor until they check-in to the program. Custodial responsibility of the minor will remain with the parents/legal guardians upon checkout from the program.

Parent/Guardian Print Name: _____

Signature: _____ Date: _____

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OPTION C – Minor Permitted to Drive

I hereby authorize and consent for my child to be released from the program without parental/guardian supervision and further hereby allow my child to drive him/herself from the premises accordingly.

The minor and I understand we are responsible for any parking fees and charges incurred. I have furthermore made sure the minor understands and agrees to abide by parking rules and regulations as outlined below.

1. Campers must turn in their car keys to the program management upon approval. The keys will be returned at the end of the day for day campers and at the end of the program for overnight campers.
2. Campers are not allowed to provide rides to other campers.
3. Campers may not leave campus for lunch.
4. Campers may not leave the campus during the program.
5. All day campers driving to and from camp will be required to check-in with their program manager after arriving and before leaving each day.
6. Campers are responsible for all parking charges incurred.

Parent/Guardian Print Name: _____

Signature: _____ Date: _____

Self Check-In/Out Designation **For Campers 15 years-old or older on the first day of camp.
Please select the check-in/check-out option for your child to be utilized during the camp.*

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Yes - Self-Check-In/Out

I authorize and give my consent for my child to check-in and or check-out [each day] during the duration of the program. I give my consent for the minor to arrive and depart the program independently [without program staff supervision]. I furthermore understand the program starts [each day] at:
_____ and ends [each day] at _____

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No - Self Check-In/Out

My child does not have permission to come and go from the program while in duration. He/she is only authorized to independently check-in at the start and check-out at the end of the program each day.

By signing below, I am acknowledging I am the parent/guardian and certify the information provided is true and accurate. I agree at the daily conclusion of the program, staff of the University of Texas at Arlington program will not have custodial responsibility for my child. I recognize furthermore my child should leave the premises following the conclusion of the program daily.

Parent/Guardian Print Name: _____

Signature: _____ Date: _____