

Fall Semester 2008/Spring Semester 2009

USPA Class _____ Day _____ Time _____

Roundtrip Service Yes No

From UMS – UCDC – SHMS to USPA

From USPA to UMS – UCDC – SHMS

Permission Slip for Student Transportation

(please print)

I give permission for my child _____ to be transported between Ursuline Campus Schools during the Fall Semester 2007 & Spring Semester 2008.

In consideration of the making of the arrangements for transportation, I hereby release and save harmless Ursuline Campus Schools and the Ursuline School for the Performing Arts, Louisville, Kentucky, and any and all personnel of the School for the Performing Arts from any and all liability for any injuries, loss, or damage to equipment / instruments, or other claims arising out of or resulting from this transportation.

During class time, parents may be reached at this phone number _____

Parent Signature _____

Date: _____

Medical Release:

I give permission for my son/daughter named above to be transported between UCS during the Fall Semester 2007 & Spring Semester 2008. In case of accident or illness, I authorize and give consent to the adult leaders present to obtain and provide medical treatment and services as are deemed necessary if I am not able to be contacted.

Parent Signature _____

Date: _____

****Please note: students must have this form completed in order to be transported from any UC School to USPA.**