



Bicycle Rider Permission Form
St. Andrew the Apostle School, Romeoville, IL
2009 – 2010

To: Mr. Leppert, Principal

From: (Parent) _____

Re: (Student) _____

Grade _____

- I give my permission for my child to ride his/her bicycle to and from school.
- I take responsibility for my child when he/she is off school property.
- My child is responsible for parking and locking the bicycle at the bicycle racks provided.
- Bike riding is a privilege. Failure to abide by the rules will result in the loss of this privilege.
- I understand the school is not responsible for lost or stolen bicycles.
- Please remember that a bicycle is a vehicle and should be ridden with care and caution.
- In addition, each child must wear protective head gear. If no headgear is present the school will promptly notify the parent to arrange for alternative transportation. Parents are notified that children, who are placed at day care, due to lack of communication or transportation, will be placed at Day Care after-school. Parents will be billed for this service accordingly.
- My child has the insurance coverage needed to do this

I hereby release and indemnify _____,

(Fill in parish, city and state)

its staff, volunteers and the Joliet Diocese, from any and all liability arising from claims of any kind or nature whatsoever.

RELEASE: If emergency treatment is required, and the parents or legal guardian cannot be reached immediately, your signature in the space provided below empowers the school authorities to exercise their judgment to transport the child to a hospital emergency room.

By signing below you agree to the terms above, and have reviewed the safety rules with your child.

Parent signature

date

Student signature

date

This request is only for this year, and a form is needed for each student riding. This is not a family form.