



855 Brotherton Road • Escondido • CA • 92025 • Office: 760-294-4490 • Fax: 760-294-4209 • www.balboaschool.com

Transportation Liability Waiver

I, _____, voluntarily authorize my child _____ (child's name), to be a passenger of Balboa School's transportation service. I assume all risks associate with his/her travel and agree to absolve, exonerate, and hold harmless Balboa School and its employees from liability for any harm or injury resulting from this travel.

Parent/Guardian Signature: _____ Date _____

Print Parent/Guardian Name: _____