



Camp Transportation Consent Form

Transportation Consent for Camp Braveheart (Bus Riders Only)

If your child is riding the bus, we must have this form on file.

By signing the Transportation Consent below, I intend to be legally bound hereby, for myself, my minor children, and my heirs, executors, administrators. For and in consideration of transportation to be provided by **Star Coaches** on **Sunday, June 7, 2009** to Camp Twin Lakes in Rutledge, Georgia, and return transportation to Children's Healthcare of Atlanta's Office Park at Tullie Circle, Atlanta, Georgia 30329 on **Friday, June 12, 2009**. I acknowledge and agree to the following:

I hereby release and forever discharge Children's, Star Coaches, their affiliates as well as their officers, directors, trustees, employees and agents for any and all liability and damages arising out of any personal injury, illness, infirmity or disease (including death), or damage to or loss of property, arising out of my or my child's riding the bus. I understand that my and my child's transportation on the bus is completely voluntary. I understand that I am responsible for picking my child up at Children's Healthcare of Atlanta's Office Park at **noon on Friday, June 12, 2009**.

I also agree to defend, indemnify and hold Children's, Star Coaches and their affiliates as well as their officers, directors, trustees, employees and agents harmless from and against any and all damages, costs, claims, demands, actions or causes of action sustained by any other person as a result of my or my child's being transported by a bus to and from Camp Twin Lakes whether caused in whole or part by the negligence of Children's, the bus company and their affiliates as well as their officers, directors, trustees, employees or agents; provided, however, that this provision shall not operate to require indemnification for any gross negligence or willful misconduct of Children's.

I HAVE READ AND I ACCEPT THE CONDITIONS DESCRIBED ABOVE.

Adult Signature: _____ **Date:** _____

Print Name: _____

Name(s) of Minor Child(ren) (if applicable): _____

