



ST. DAVID'S SCHOOL

RELEASE FROM TRAVEL LIABILITY FOR OFF-CAMPUS LUNCH

I _____ hereby release St. David's School, its trustees, officers, employees, and
(student's name)
agents from any and all liability for personal injury arising out of my decision to travel to and/or from an
off-campus establishment during lunch time. Also, I understand that I will be responsible for providing all
actual and necessary expenses regarding my travel plans.

Print Name of Student

Signature of Student

Date

Signature of Parent

Date