

**FAIRFAX HIGH SCHOOL  
PARENTAL AUTHORIZATION &  
ACKNOWLEDGEMENT OF RISK  
(STUDENT DRIVING FOR ATHLETIC ACTIVITIES)**

I, \_\_\_\_\_, give permission for my son/daughter, \_\_\_\_\_,  
(Printed Parent Name) (Printed Student Name)  
to ride in a vehicle driven by another student (designated driver), who is  
driving to and from practice, and/or competitive meets, and/or other team  
functions.

My son/daughter (by signature below) agrees to stay within the boundaries of  
this authorization, and understands that any deviation will automatically  
revoke it; and, further understands that any deviation will place at risk  
his/her position and status on, and with, the Fairfax High School  
~~X-Country~~ Team. My son/daughter also agrees to travel ONLY directly to  
and from practices, meets, and other team functions.

I understand that no student can be a designated driver without completion of  
the appropriate form (Attachment C, Notice 5790) by the designated driver's  
parents.

I further understand that I may revoke this permission at any time by  
contacting the Head Coach, or the Director of Student Activities, at Fairfax  
High School.

Signed \_\_\_\_\_  
Student Signature

Date \_\_\_\_\_

Signed \_\_\_\_\_  
Parent Signature

Date \_\_\_\_\_