

## BUS RESERVATION FORM

DATE OF RESERVATION: \_\_\_\_\_ TIME: \_\_\_\_\_

ACTIVITY/ORGANIZATION: \_\_\_\_\_

NUMBER OF STUDENTS AND ADULTS ON BUS: \_\_\_\_\_

NAME OF PERSON IN CHARGE: \_\_\_\_\_

PHONE NUMBER OF PERSON IN CHARGE \_\_\_\_\_

NAME OF INSURANCE COMPANY AND AMOUNT (if applicable): \_\_\_\_\_

**NOTE: LIQUOR OR TOBACCO PRODUCTS  
ARE NOT ALLOWED ON THE PREMISES**

## INDEMNIFICATION AGREEMENT

For the sole consideration of the use of the premises known as \_\_\_\_\_, located the City of \_\_\_\_\_, N.D. on \_\_\_\_\_, 20\_\_\_\_, the undersigned does hereby fully and forever release and discharge the TIOGA PUBLIC SCHOOL DISTRICT # 15, its agents and employees; and their heirs, personal representatives, successors, and assigns from all claims, demands, damages, actions, rights of action, of whatever kind or nature which hereafter arise out of, in consequence of, on account of, or in any way derived from the use of the aforescribed premises.

I/We further agree to reimburse the TIOGA PUBLIC SCHOOL DISTRICT # 15 for the cost of repairing any damage incurred to the premises while utilized by the undersigned, or to the replacement of same value to the loss of equipment from said premises resulting from the use of the undersigned.

Dated at \_\_\_\_\_, N.D., this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Individual