

Athletic Participation and Travel Consent Form

I, \_\_\_\_\_, the parent and/or legal guardian of \_\_\_\_\_, hereby give permission to my son/daughter to compete as a member of \_\_\_\_\_ team. I give permission for my son/daughter to travel by commercial \_\_\_\_\_ (school name) carrier or volunteer driver to and from all "away" games (meets) during the season which begins in the month of \_\_\_\_\_ and ends in \_\_\_\_\_.

**NOTE:** If volunteer drivers are used, I give permission for my son/daughter to travel with a volunteer driver who is a responsible:

- a) Teacher \_\_\_\_\_ b) Parent \_\_\_\_\_ c) Student \_\_\_\_\_

As well, I hereby authorize the Doctor and Nursing Staff of any Emergency Unit to undertake examination, investigation and necessary treatment of my son/daughter in the event of a medical emergency.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

*Thank you for your interest and support,*

**Athletic Department**

- Note to Parent(s):**
- 1. Students under the age of 18 are not permitted to transport other students.
  - 2. It is recommended that a team schedule accompany this Form.