



Traverse City Area Public Schools
Athletic Department
Transportation Permission and Release Form

Athletic contests & trips have been planned for the _____ Team during the _____ (Fall/Winter/Spring) Season of _____ (Year).

Student Athletes will travel by: _____.
(Example: Private car or rental vehicle)

By signing below I give my permission for my child _____
(student athlete's name)
to be transported as described above or by private car transportation with information disclosed below:

Transportation as follows:

Driver(s)	Vehicle(s) Type *Owner's Name	License Plate #	Insurance

- Type of vehicle to be used, i.e. sedan, station wagon, van etc. and vehicle's owner should be identified in this columns.

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____