

PERMISSION TO RIDE

Date: ____/____/____

I give permission for:

(name of child)

(name of child)

(name of child)

to be transported by the following individual/s or family/ies. My signature below absolves Central Lutheran School of any liability for injuries/trauma that might occur while my child/ren are in the care of the people who are designated below to transport them. *I also agree to call the school or send written permission for each and every time my child/ren will be transported by someone other than his/her parents.*

(Parent Signature)

Individuals who are allowed to transport my child/ren to sporting events and/or school-related functions.
