

BEACHES CHAPEL ATHLETICS Athletics Travel Permission

I give consent for	(name of athlete	e) to travel to and from
athletic events scheduled by the Be	aches Chapel School Athletics. I understand	the department policy
will be to provide transportation I	by bus/van, but in the event a bus/van is	not available, private
transportation may need to be use	d. These vehicles will be driven by respons	ible adults with a valid
driver's license (parents of athletes	and/or coaches), and they and/or Beaches C	hapel School cannot be
held responsible for any accident or	injury that might occur.	
Athlete Signature	Parent/Guardian Signature	Date