

## **PERMISSION TO RIDE FORM 2024-2025**

Permission Slip to Ride with another Student or Parent:		
Student's Name:	Grade:	
Parent/Guardian who authorized (please print):		
By signing this waiver, I authorize my child (listed above) to	ride with anoth	er
student		
parent		
to athletic practices/games, or go only to the places I have	designated belov	W.
This permission slip is only valid for the <b>2024-2025</b> school y	vear.	
Signature of Parent/Guardian:		
Date: Cell Phone Number:		
Fill out the following section only if you want to designate student can go or ride with:	specific places or	r <b>people</b> your
Will the child have a cell phone with them when traveling?	YES	NO
Phone number to reach child if necessary:		