



Permission Slip  
Student Athlete Not Riding Bus To or From Practice

Please return this form to your Head Coach

Sport: \_\_\_\_\_

Athlete Name: \_\_\_\_\_

Practice Site: \_\_\_\_\_

*Please check one for licensed driver:*

\_\_\_\_ I will allow my son/daughter to drive \_\_\_\_\_ (name of student)  
to and/or from practice on a need basis.

\_\_\_\_ I will not allow my son/daughter to drive teammates to and/or form practice.

*Please check one for non licensed driver:*

\_\_\_\_ I will allow my son/daughter to drive to and/or from practice with  
\_\_\_\_\_ (name of licensed driver).

\_\_\_\_ I will not allow my son/daughter to ride to and/or from practice with another  
student.

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

Date: \_\_\_\_\_