

St. Pius V Catholic School

Permission for Transportation

Student Name: _____ Grade: ____ Sport: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____

- My child has permission to ride to a SPV sports event with a VIRTUS trained parent or guardian during the 2015 – 2016 athletic season.

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

- My child has permission to ride home from an SPV sports event with a VIRTUS trained parent or guardian during the 2015 – 2016 athletic season.

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

Driving Parent/Guardian Name (print)

As the parent/guardian of this student, it will be my responsibility to make arrangements with a specific parent or guardian if my child needs a ride to or from an SPV sports event. Please submit this written permission form to the Athletic Director. Any changes or updates must be made directly with the Athletic Director.

Parent/Guardian Signature

Date