



## St. John School Sports Registration & Transportation Permission Form

### Participant Information

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

Grade: \_\_\_\_\_

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

T-shirt size: \_\_\_\_\_

Jersey Number Preference (please list 3): \_\_\_\_\_

### Emergency Contact Information

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_

I, the undersigned, give permission for my child, \_\_\_\_\_, to be transported by a parent volunteer from St. John School to Salesian Park for practice. I understand that all drivers will be approved by the school and must carry a valid driver's license and insurance. I acknowledge that my child will be under the supervision of school-approved adults during this time.

I understand that the transportation will be provided by parents or guardians who have volunteered and been approved by the school. I also understand that these individuals are not employees of St. John School, and that the school does not provide or oversee the operation or condition of these private

vehicles.

By signing this form, I release and hold harmless St. John School, its staff, and its representatives from any and all liability, claims, or demands arising out of or related to the transportation of my child by a parent volunteer.

**Transportation Information**

My child will be riding with (name of driver/parent):

\_\_\_\_\_

If I am driving, the students I will be transporting include:

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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