



Middleville Thornapple Kellogg High School

Athletic Department

3885 Bender Road Middleville Michigan 49333

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athletics@tkschools.org

Brian Balding, Athletic Director

Sharon Jansma, Athletic Secretary

I _____, authorize my son/daughter _____,
(Parent/Guardian Name) (Student-Athlete Name)

to ride with the parent/guardian listed below from the identified location/event on the specified date. I understand that my son/daughter must also advise the coach or supervising adult of this fact before departing from the location/event on the specified date with the authorized parent/guardian.

I recognize that the driver(s) listed below are not acting as an agent of the Thornapple Kellogg Schools or any of its employees.

Dated _____, 2010

Parent/Guardian Signature

Authorized Parent/Guardian

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____