

**Permission to Travel
2012 HHS Mariner Softball Season**

I, _____ parent/guardian of _____

grant permission for her to travel with the HHS Mariner JV or Varsity Softball team to and from games during the 2012 Softball Season. Travel will generally be in KPBSD of First Student Buses.

I **do / do not** give permission for my daughter to travel with other students to and from practice in their private vehicles.

I **do / do not** give permission for my daughter to use the Dome with other students (with / without coach supervision) after she has received an introduction to the safety rules of the facility.

I, _____ parent/guardian of _____ also give my permission for Bill Bell, Mary Jo Campbell, Jen Liston, Suzie Parrish or other coach to seek medical care for my daughter and make any necessary decisions if I am unable to be contacted. Obviously, all efforts will be made to contact you prior to seeking medical care.

These permissions may be revoked at any time by speaking with the coaches and this form will be returned.

Health Insurance Policy and Number _____

Name of Insured _____

signed	printed name	date
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Home phone: _____ Cell Phone: _____ Alternate Contact: _____