Child Transportation Authorization Form

I hereby give authorization and consent for the transportation of my child as described below:

My child _____ may be transported with _____.

Authorization Details

Child's Full Name:	_____
Authorized Transporter Name:	_____
Effective Date / Period:	_____
Emergency Contact Phone:	_____

Parent / Guardian Acknowledgement & Signature

By signing below, I certify that I am the legal parent or guardian of the child named above and possess the authority to grant transportation permission.

Parent / Guardian Signature: _____	**Date:** _____
Printed Name: _____	