

HEALDSBURG BULLDOGS

PLAYER TRANSPORTATION PERMISSION SLIP

Emergency Information

I give permission for my child, _____ to be transported by a Healdsburg Bulldogs Coach or Administrator to attend a game, practice or scrimmage.

Team Division _____ Coach Driving _____

X _____

Parent or guardian signature

Date

In case of emergency, please contact:

Name/Relationship

Phone

Special Instructions: