



The Summit Country Day School

Student Athlete Driving Permission Transportation Form

Please print

Date _____

Student's Name _____

Sport _____

Parent's Name _____

Coach's Name _____

The student-athlete listed above has my permission to drive to the Summit Athletic Complex or other practice sites designated by the coach, as well as away athletic contests in his or her automobile. Parents should be cognizant that there will be instances when our coach will require your child to ride in a school-provided transportation only.

Parent Signature _____

Coach Signature _____

I give my child permission to ride with another Summit student driver to the Summit Athletic Complex and away athletic contests.

Parent Signature _____