

Transportation Parental Consent Form

Arizona Lutheran Academy

6036 S. 27th Ave., Phoenix, AZ 85041

Phone: 602-268-8686

Fax: 602-243-1353

By signing below, I give permission for my child, _____, to drive/ride
(child's name)

to/from the _____ on _____
(activity/event) (date)

with _____
(name of driver)

IT IS HEREBY understood that I/we release Arizona Lutheran Academy, its Board of Directors, employees, agents and representatives from any claim we may have resulting from any illnesses or injuries sustained by our child while under the supervision of the above named individual who is transporting my/our child. We further agree to hold harmless Arizona Lutheran Academy, its Board of Directors, employees, agents and representatives from any injury or damage which may be caused by my/our child(ren).

Parent/Guardian Signature

Cell Phone #

Date