

DEPARTMENT OF ATHLETICS **380 ELM STREET** NORTHAMPTON, MASSACHUSETTS 01060 dproulx@northampton-k12.us http://www.northamptonschools.org/project/athletics DAVID PROULX DIRECTOR OF ATHLETICS

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ATHLETICS TRANSPORTATION WAIVER

I, ______ understand that the Northampton coaches (Parent/Guardian Name - Please Print)

with other parent/student volunteers will be providing transportation and I give permission

for my child ______ to travel to ______ (Athlete's Name - Please Print) (Destination)

on ______ with ______. (Date) (Name of Driver)

(Signature of Parent/Guardian)

(Date)