

GHFC
Gulls Academy

Permission Slip for Transportation/Overnight Stay

I, _____, hereby give my consent for my child, _____, to travel with and remain in the care of GHFC for the duration of the listed event. I understand that participation in this program involves certain risks and hazards, including but not limited to, physical injury or harm, and I accept these risks on behalf of my child.

Release of Liability:

I agree to release, discharge, and hold harmless GHFC, its officers, directors, employees, agents, and representatives from any and all claims, demands, causes of action, or liability arising out of my child's participation in the listed event.

Medical Information:

I hereby certify that my child is physically able to participate. I authorize GHFC and its representatives to obtain medical treatment for my child in case of an emergency. I understand that I am responsible for any and all medical expenses that may be incurred on behalf of my child.

Transportation/overnight stay:

I give my permission for my child to be transported to and from scheduled games by GHFC, its officers, directors, employees, agents, and representatives. For Multi-day events I authorize GHFC to obtain suitable lodging for my child and will be provided the address that my child will be at overnight.

I have read and understood the terms and conditions of this permission slip, and I agree to abide by them.

_____ has permission to ride with

_____ for travel to / from

_____.

Parent/guardian name: _____

Contact Phone number: _____

Signature of parent/guardian: _____