Dexter Community Schools Athletic Department Transportation Permission Slip (Track Meets) **THIS SLIP MUST BE TURNED IN TO COACH AT LEAST 24 HOURS BEFORE A MEET**

I,	, give my permission for my son/daughter to ride home from			
(parent/guardian name)				
the	_ meet on		_ with _	
(name of "away" school site)		(date of meet)		(name of self or other adult driver)
I understand that students may ride	home with leg	al adults only.	They m	nay not ride home with older
siblings or other minors.				
(Parent/Guardian signature)		_		
(Athlete's first and last name)				
(Date signed)				
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