Permission to Travel 2014 HHS Mariner Softball Season

I,	parent/guardian of	
grant permission for her to	travel with the HHS Mariner JV or Varsity	Softball team to and from games during the 201
Softball Season. Travel wi	ill generally be in KPBSD or First Student E	Buses or Private Parent-driven Approved Car.
I do / do not give per	mission for my daughter to travel with other	students to and from practice in their private
vehicles.		
I do / do not give perm	nission for my daughter to use the Dome wi	th other students (with / without coach
supervision) after she has r	eceived an introduction to the safety rules o	f the facility.
I,	parent/guardian of	also give my permission
for Bill Bell, Holly Norlinb	perg, Sherry Ellison, Jessie Erickson or othe	r coach to seek medical care for my daughter
and make any necessary de	ecisions if I am unable to be contacted. Obvi	ously, all efforts will be made to contact you
prior to seeking medical ca	re.	
These permissions may be	revoked at any time by speaking with the co	paches and this form will be returned.
Health Insurance Policy an	d Number	
Name of Insured		
signed	printed name	date
Home phone:	Cell Phone:	Alternate Contact: