



Pioneer Kids Week

TRANSPORTATION AUTHORIZATION

All transportation requests must be stated in writing

I give permission for my child to be released to the following people from the "Pioneer Kids Week" program; I have listed myself and/or my partner first on this list.

Please note that your child will ONLY be released to those on the list below, so please write parent names, including your own.

Child's Name _____

1. Name _____ Relationship _____

Phone _____

2. Name _____ Relationship _____

Phone _____

3. Name _____ Relationship _____

Phone _____

Parent/Guardian signature

Date