



# ATHLETIC TRANSPORTATION FORM

## Student Information *To be completed / verified by the parent/guardian*

First Name	Last Name	Grade Level
Emergency Contact 1	Emergency Contact 2	Emergency Contact 3

## Parent Statement

I hereby grant permission and authorize Oak Creek Charter School of Bonita Springs to transport my child by bus to and from athletic events, including but not limited to practices and games/meets. Furthermore, I authorize school staff to obtain medical treatment for my child, which includes required emergency transportation, in case of serious illness or injury and agree to pay for such treatment. Further, I understand that all code of conduct and student rules apply to my child while they are attending a school sponsored athletic event.

Parent Signature	Date
Phone Number	