916.294.7426 info@hands4hopeyouth.org www.hands4hopeyouth.org



873 Embarcadero Drive, Suite 5 El Dorado Hills, CA 95762

PERMISSION TO TRANSPORT PROGRAM YEAR 2019-2020

(I)/(We), the undersigned parent/guardian of _______, a minor, give permission for him/her to be transported in the vehicle of a Hands4Hope insured and fingerprinted volunteer, OR staff member to any and all Hands4Hope events and activities during the 2019-2020 program year* . I understand that this volunteer is an adult over the age of 18 and that other youth may be riding in the same vehicle.

*June 1, 2019 - May 31, 2020

(I)/(We), the undersigned, understand that Hands4Hope - Youth Making A Difference will not be held liable for any accidents or injuries that may occur while said minor is being transported.

 Parent/Guardian Name	_ Date
Parent/Guardian Signature	 Date
Parent/Guardian Name	Date
Parent/Guardian Signature	Date

For Hands4Hope Staff /Adult Lead Only

Received by, Hands4Hope Staff/Adult Lead Name	Date

Vision: A community of civic minded and socially responsible citizens for generations to come Mission: Inspire and empower youth in leadership and service Hands4Hope is a non-profit, charitable 501(c)(3) organization. All donations are tax deductible.