



## 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
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