



# Washtenaw Christian Academy

7200 Moon Road † Saline, Michigan 48176 † (734) 429-7733 † Fax: (734) 944-8343

## **Private Vehicle Transportation Form and/or Bus Transportation Form**

REQUEST FOR PERMISSION TO TRAVEL TO AND /OR FROM AWAY GAMES IN A PRIVATE VEHICLE AND/OR BUS.

This form is to be completed by parent or guardian at the beginning of each school year or athletic season.

My student \_\_\_\_\_ has my permission to travel with or  
(Name of student)

ride in a private vehicle and/or bus for the school year or athletic season 2008-2009. The driver of the vehicle is to be approved and registered at the WCA school office. Approved drives must be over 21 years of age.

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date