



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. The driver of the vehicle is to be approved and registered at the WCA school office. Approved drivers must be over 21 years of age.

Parent signature

Date