

PARENT/CAREGIVER CONSENT FORM FOR TRANSPORT

I,, give permission for my child,
, to be transported to basketball
training/games/authorised team events, for the duration of the 2023/2024 season or
for date/ (please circle one)
Name
Position (Coach, Team Manager etc.)
Phone Number
I understand that my child will only be transported to events that are directly associated
with their involvement with
Basketball Club/Association and that I will receive written (may be in electronic form)
information including the venue, dates and times and who will be transporting my child.
I understand that there may be other adults or children/young people associated with my
child's Basketball Team/Club/Association in the car while my child is being transported.
Parent/Caregiver phone number
Parent/Caregiver address
Second Emergency Contact name and phone number
Signature (or electronic signature)