

GRACE CHRISTIAN ACADEMY

PERMISSION TO RIDE

SCHOOL YEAR: _____

My children (listed below):

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Have my permission to ride with the following people:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

I understand that the person(s) listed above will be the driver(s).

Father's Signature _____ Date: _____

Mother's Signature _____ Date: _____

My child, _____, who **will be the driver**, has my permission to give the following students a ride:

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Father's Signature _____ Date: _____

Mother's Signature _____ Date: _____