

Transportation Release

STOP!!! Do not send this form with your registration!
This form **MUST** be in the possession of any driver of minors.

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| Name of Youth: _____ |
| Home address & Phone: _____ _____ |

This form is required for if a minor is being transported to or from an NCNC UCC event with an adult other than a custodial parent or guardian. Please note that all persons transporting minors must be at least 21 years of age.

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| <i>The following persons have my permission to transport the above named minor to and/or from _____ on (dates) _____.</i> |
| <i>I further grant permission to the person(s) listed below to act as my agent(s) while transporting my child, in authorizing any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by and is rendered under the general or special supervision of any physician and surgeon licensed under the provision of the Medicine Practice Act. (The above to occur only after reasonable efforts to contact the undersigned have been unsuccessful.)</i> |

Name of person driving my child to the event:

_____ Home Phone: _____

Name of person driving my child home from the event:

_____ Home Phone: _____

Comments, additional information: _____

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California.

Signature of Custodial Parent or Guardian:

Please print name: _____

Phone numbers where you may be reached while your child is traveling to and from this camp/event:
