



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)

Date