



## TRANSPORTATION AGREEMENT

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This is to certify that I give \_\_\_\_\_  
Name of Facility

Permission to transport my child \_\_\_\_\_  
Name of Child  
from \_\_\_\_\_ at \_\_\_\_\_ (am/pm)  
Pickup Location  
to \_\_\_\_\_ at \_\_\_\_\_ (am/pm).  
Delivery Location

My child will be transported from \_\_\_\_\_ at \_\_\_\_\_ (am/pm).  
to \_\_\_\_\_ at \_\_\_\_\_ (am/pm)  
Delivery Location

on the following days:

X  
\_\_\_\_\_ Monday  
X  
\_\_\_\_\_ Tuesday  
X  
\_\_\_\_\_ Wednesday  
X  
\_\_\_\_\_ Thursday  
X  
\_\_\_\_\_ Friday

\_\_\_\_\_ is authorized to receive my child. In the event the authorized  
Name of Authorized Person  
person is not present to receive my child, the following procedures are to be followed:

\_\_\_\_\_  
\_\_\_\_\_

The \_\_\_\_\_ is approximately \_\_\_\_\_ miles from the center.  
Location

In the event that my child is not to be transported as outlined above, I agree to notify the

\_\_\_\_\_  
Facility

Signature (Parent/Guardian) \_\_\_\_\_ Date \_\_\_\_\_