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**Hickory Ridge Academy
3320 South Battlefield Blvd.
Chesapeake, VA 23322
757-204-4271**

**Parental Consent for Transportation
(for North Carolina residents only)**

**Permission to Transportation** (Moyock Students Only) **2019-2020

Parent(s) / Guardian(s):** It is the policy of the Hickory Ridge Before/Afterschool Program (HRBASP) and Hickory Ridge Community Church (HRCC) to require written permission for transportation of all students to school from the Before School Program and from school to the Afterschool Program. A signed, parental consent form is required for all transportation.  **Please check all that apply and sign and date this consent.**

**Child’s Information**

**Please Print**

|  |  |  |
| --- | --- | --- |
| **Child Last Name** | **Child First Name** | **Child Middle Name** |
| **Name Child Prefers to Be Called** | **Date of Birth** | **Age/Grade**  | **Check One:** **\_\_\_\_ Male**  **\_\_\_\_ Female** |
| **School In Which Child Enrolled** | **Grade** |  |

**Transportation Information/Consent**

Please check ALL that apply:

|  |  |
| --- | --- |
|  | Before School Travel from HRBASP (located at 3320 So. Battlefield Blvd. – HRCC) to school listed above |
|  | After School Travel from school listed above to HRBASP  |

Please check all acceptable methods of transportation accepted for your child:

|  |  |
| --- | --- |
|  | My child has permission to ride with the HRBASP school/church staff in their personal vehicle (in case of emergency). |
|  | My child has permission to ride a school / church 15-passenger van designated for BASP care. |
|  | My child has permission to ride a school / church bus (24 passenger).  |

Please note: All staff are licensed, insured, qualified drivers who have been through thorough background checks. Drivers are authorized to drive the above stated vehicles and said vehicles are insured for use. All safety measures and laws will be observed for the safety and well-being of the transported child. I have also completed an emergency medical authorization which is on file at the school should any unforeseen accident or emergency occur during transport.

I, the undersigned parent(s)/legal guardian(s) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby grant permission for my child to be transported to and/or from the HRBASP as indicated above.

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

Parent/Guardian Signature Date Signed

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

Parent/Guardian Signature Date Signed