

C.C.A. SPORTS TRANSPORTATION FORM

Student's Name _____

Date _____ Grade _____

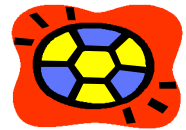
I do hereby grant permission for _____ to accompany C.C.A. staff members to the following activity:

ACTIVITY: All practices and games for the 2010-2011 school year for the following sports (please circle all that apply)

BASEBALL SOCCER BASKETBALL CROSS COUNTRY SOFTBALL

In signing this form, I do take full responsibility for any and all injuries sustained by this student while in the care of CCA-appointed chaperones. I do so with the agreement that such activities are properly organized and supervised.

Signed _____ Date: _____



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