

Dear Parents,

Having made a sports team, your child will be making numerous team trips to opposing schools both in and out of the Wilmington area. All of these trips will require your athlete to be transported to the game and back, sometimes arriving back at WCA quite late in the evening. Some trips, especially Regional and State Tournaments, may require an overnight stay.

Your child will always be adequately supervised and cared for to the best of our ability on these trips. We are asking you as parents to sign this one-time permission request for your athletes to participate in all school sanctioned trips. In case of an emergency and you cannot be reached, this signature will give the coaching staff permission to act and/or make decisions on your behalf.

Thank you for your cooperation.

Sincerely,

Craig Tucker
Athletic Director

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I give _____ permission to travel to and from
(Student's Full Name)

any sports trip on school provided transportation. In case of an emergency, I understand that every effort will be made to contact the athlete's parents or guardians. In the event that I cannot be reached, I hereby give permission to the physician selected by the chaperons to hospitalize, secure proper treatment for, and/or order injection of anesthesia or surgery for my child.

Parent's/Guardian's Signature

Home Phone #

Emergency Phone #