

The Susquehanna Waldorf School
Educating Head, Heart, and Hands
15 W. Walnut Street Marietta, PA 17547
717-426-4506 phone / 717-426-3326 fax
www.susquehanna.org



Sports Program Permission Slip

_____ has my permission to participate in _____.
Child's Name Activity

I understand that this may involve attending games at other schools and my child has permission to drive with a coach or a parent to and from the game or event. I understand that all drivers provide proof of insurance and a driver's license to the school and that my child will be required to wear a seatbelt.

Signature of Parent/Guardian

Print Name

Date