

Sweetwater Academy

Transportation Agreement

This is to certify that I give Sweetwater Academy

Permission to transport my child: _____

Name of Child

From: Sweetwater Academy at 7:10am

To _____ at _____ am

Name of School

My child will be transported from _____ at _____ pm

to Sweetwater Academy at _____ pm

On the following days:

_____ Monday

_____ Tuesday

_____ Wednesday

_____ Thursday

_____ Friday

Sweetwater Academy staff member is authorized to receive my child. In the event the authorized

Person is not present to receive my child; the following procedures are to be followed:

The _____ is approximately _____ miles from Sweetwater

Name of School

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

Signature (Parent/Guardian) _____

Date _____