

Carroll Catholic School
111 Fourth Street, Lincoln, Illinois 62656

ATTACHMENT B
PARENT'S PERMISSION FOR TRAVEL

I give my permission for my child, _____, to do one or more of the following (please check):

- ___1. Travel in parish or school-approved transportation only.
- ___2. Ride in the vehicle of another student/minor whose parents are driving.
- ___3. Ride in the vehicle of a chaperone.

Signature of Parent/Guardian

Signature of Parent/Guardian

Printed name of Parent/Guardian

Printed name of Parent/Guardian

Date: _____

Date: _____