



**WRITTEN PERMISSION FOR AN UNRELATED ADULT ATHLETE TO SHARE THE SAME
HOTEL, SLEEPING ARRANGEMENT OR OVERNIGHT LODGING LOCATION WITH
MINOR
ATHLETE**

I, _____ legal guardian of , _____ a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____ (minor athlete), to stay in the same hotel room of, or share a sleeping arrangement or other overnight lodging location with _____ (unrelated adult athlete) at _____ (location of hotel room or other overnight lodging location) from _____ to _____ (dates of applicable rooming arrangement).

I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____



**WRITTEN PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO PROVIDE
LOCAL TRANSPORTATION TO MINOR ATHLETE**

I, _____, legal guardian of, _____
a minor athlete, give express written permission, and grant an exception to the Minor Athlete
Abuse Prevention Policy for, _____, an unrelated Applicable Adult to provide
local vehicle transportation to _____(minor athlete) to
_____(destination) on _____(date(s)) at _____(approximate time), and
further acknowledge that this written permission is valid only for the transportation on the specified
date and to the specified location.

Legal Guardian Signature: _____

Date: _____



**WRITTEN PERMISSION FOR A LICENSED MASSAGE THERAPIST OR OTHER
CERTIFIED PROFESSIONAL OR HEALTH CARE PROVIDER TO TREAT A MINOR
ATHLETE**

I, _____, legal guardian of, _____
a minor athlete, give express written permission, and grant an exception to the Minor Athlete
Abuse Prevention Policy for _____(massage therapist or other certified
professional) to provide a massage, rubdown and/or athletic training modality on
_____(minor athlete) on _____(date) at
_____(location). The massage, rubdown or athletic training modality must be done with
at least one other adult present in the room and must never be done with only
_____(minor athlete) and _____(massage therapist or other
certified professional) in the room. I acknowledge that I have the right to observe the massage,
rubdown or athletic training modality. I further acknowledge that this written permission is valid only for
the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____



**WRITTEN PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO TRAVEL TO
COMPETITION ALONE WITH MINOR ATHLETE**

I, _____, legal guardian of, _____
a minor athlete, give express written permission, and grant an exception to the Minor Athlete
Abuse Prevention Policy for _____ (minor athlete), to travel with
_____ (Applicable Adult), to travel from _____ (point of
origin) to _____ (destination) to attend the _____ (name
of competition) from _____ to _____ (dates of travel to competition). I acknowledge
that (minor athlete) cannot share a hotel room, sleeping arrangement or other overnight lodging
location with _____ (Applicable Adult) at any time. I further acknowledge that
this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____