



**PASSENGER
PERMISSION FORM**

This form must be completed by a parent/guardian of any student intending to travel to and/or from school as a passenger of a student driver of this school.

I give permission for:

Student Passenger Name: _____

Date of Birth: _____

Emergency Contact Details: _____

Class Teacher: _____

To travel with:

Student Driver: _____

We accept all conditions as detailed in the school's Student Driver Guidelines.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Student Passenger Name: _____

Student Signature: _____ Date: _____

SCHOOL TO COMPLETE THIS SECTION

Approved By: _____

Signature: _____ Date: _____