



**Date of Approval:**  
December, 2022

**Approved by:**  
WGB Board of Directors

## TRAVEL CONSENT FORM

**“Organization” refers to: Whitehorse Glacier Bears Swim Club (WGB)**

To whom it may concern,

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_  
give my consent for my child to travel with the Whitehorse Glacier Bears Swim Club, under the care of the designated Coach(es) and Chaperone(s) associated with the club.

My child’s date of birth is \_\_\_\_\_ at the location of \_\_\_\_\_

If required, my child’s passport number is \_\_\_\_\_.

**Attached to this form or listed below are a list of any additional medical needs my child requires.**

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**Additional Notes:**

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I understand that this event is being conducted according to Team Travel under our Travel Policy.

Location of Event: \_\_\_\_\_

Barring extenuating circumstances and/or travel delays the duration of the event including travel to and from will be days between the dates of: \_\_\_\_\_ and \_\_\_\_\_.

**If there are any questions about the consent provided, I can be reached at:**

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Dated: \_\_\_\_\_