<u>WRITTEN PERMISSION FOR A LICENSED MASSAGE THERAPIST OR OTHER CERTIFIED</u> <u>PROFESSIONAL OR HEALTH CARE PROVIDER TO TREAT A MINOR ATHLETE</u>

	Metro Area Life Time		
	LIFETIME		
I,	, legal guardian of		
a minor athlete, give express	written permission, and grant an exce	ption to the Minor Athlete	
Abuse Prevention Policy for (massage therapist or other certified			
professional) to provide a ma	ssage, rubdown and/or athletic trainin	g modality on	
	(minor athlete) on	(date)	
at	(location). The massage, rub	down or athletic training	
modality must be done with a	it least one other adult present in the r	oom and must never be done	
with only	(minor athlete) and		
(massage therapist or other of	certified professional) in the room. I ac	knowledge that I have the	
right to observe the massage	, rubdown or athletic training modality	. I further acknowledge that	
this written permission is valie	d only for the dates and location speci	fied herein.	
Legal Guardian Signature:			

Date: _____

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

Metro Area Life Time
LIFE TIME

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:

<u>PERMISSION FOR AN UNRELATED ADULT ATHLETE TO SHARE THE SAME HOTEL,</u> <u>SLEEPING ARRANGEMENT OR OVERNIGHT LODGING LOCATION WITH MINOR</u> <u>ATHLETE</u>



I,		, legal guardian of,
a minor athlete, give	express wri	tten permission, and grant an exception to the Minor Athlete
Abuse Prevention Policy for		(minor athlete), to stay in the same
hotel room of, or sha	are a sleepin	g 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 acknowledg	ge that this w	ritten permission is valid only for the dates and location
specified herein.		

Legal Guardian Signature:

Date: _____