

MANTA RAYS SWIM TEAM OVERNIGHT/LODGING PERMISSION FORM

Please complete and sign one (1) Form for each athlete.

Written permission for an unrelated adult/athlete to share the same hotel, sleeping arrangement or overnight lodging location with a minor athlete.

I,, legal guardian of		
	a minor athlete,	e, 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		
	(unrela	lated adult/athlete) at
	(locatio	ion of hotel 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 locations specified herein.		
Legal Guardian Name:		
Signature:		Date:
<u>Team Use Only</u>		
Received Date:		
Ву:		

