



**CANOE KAYAK
CANADA**

**It's Who We Are.
C'est Notre Nature.**

PARENTAL PERMISSION FORM FOR TRAVEL BY ATHLETES UNDER 18 YEARS OF AGE

Athlete Name _____

Event Name _____

Event Location _____

Travel Dates _____

I, _____ The parent/guardian of the above-named athlete,
hereby give permission for him/her to travel to the above-mentioned Canoe Kayak Canada event.

I have attached to this Travel Permission Form, the required Emergency and Medical Information.

I authorize the Canoe Kayak Canada nominated coaches at this event to supervise my son/daughter for the duration of this trip. I also authorize the Canoe Kayak Canada coaches to treat any medical emergencies that may occur while my son/daughter is traveling with the team for this event.

Parent/Guardian Signature _____

Parent/Guardian Name _____

Date _____

Parent/Guardian Address _____

Emergency contact phone number _____