



FORM D-1 PARENT/GUARDIAN PERMISSION SLIP FOR STUDENT TO BE TRANSPORTED BY A PRIVATE VEHICLE

SALINA CATHOLIC SCHOOLS/PARISH

Activity Date: _____

I give permission for my child, _____, to be a passenger in a private vehicle driven by a diocesan approved driver. I understand that the _____ (**insert name of school/parish**) and Salina Catholic Diocese are not liable for damages arising from the operation of a private vehicle.

Parent/Guardian Signature _____ Date: _____

Printed Name _____