

# TAVON CENTER

## Consent to Transport

Participant's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I, \_\_\_\_\_, parent/guardian of  
\_\_\_\_\_, give drivers of the

Tavon Center staff, permission to transport my young adult in the Tavon Center van for field trips related to the programs of Tavon Center.

This permission is in effect for as long as my young adult is enrolled at Tavon Center.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_