



DUTCH LIONS
Athletics

BUS TRANSPORTATION AUTHORIZATION

I give permission for my child (print full first and last name)

to travel by bus with the Dutch Lions team with My Language Programs from De Nederlandse School in Bethesda at St. Barth's located at 6900 River Rd in Bethesda, MD 20817 to the locations where the soccer program my child is enrolled in takes place during the current school year (specify date within the school year below).

I hereby agree to hold harmless My Language Programs, its subsidiaries and parent company as well as its directors, officers, employees, contractors and agents, from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees, related to the bus transportation of my child by My Language Programs, including but not limited to all claims for compensation, bodily injuries, and property damages whether arising out of alleged negligence.

I authorize emergency medical treatment in the event of an accident and I understand that every reasonable effort to notify us will be taken upon learning of an accident and/or prior to rendering emergency treatment.

Parent Signature

Parent First and Last Name: _____

Emergency Cell Phone Number: _____

Date: _____