



CENTRAL KITSAP SCHOOL DISTRICT NO. 401  
Silverdale, Washington 98383

**AUTHORIZATION FOR PARENT TO TRANSPORT  
OWN CHILD FROM ACTIVITY**

I request permission to transport my son/daughter \_\_\_\_\_  
home on \_\_\_\_\_ (date) from the following school activity:

\_\_\_\_\_.

\_\_\_\_\_  
*Signature of Parent*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Date*