

## Georgia 4-H Alternative Transportation Form

\*when traveling to or from a 4-H event and not with the county group\*



**4-H member's name** \_\_\_\_\_ **County** \_\_\_\_\_

**Age** \_\_\_\_\_ **Event** \_\_\_\_\_ **Date of event** \_\_\_\_\_

**Mark all that apply:**

\_\_\_\_\_ I give permission for my child to drive his/herself. I understand that keys may be collected by the event coordinator, and that my child will not be permitted to drive during the event, once his or her automobile is parked in the designated location. My child has a valid driver's license and auto liability insurance.

\_\_\_\_\_ I give permission for my child to drive his/herself and other 4-H'ers to/from the above 4-H function. My child has a valid driver's license and auto liability insurance. The following 4-H'ers will be riding with my child, and permission has been obtained from their parents/guardians: \_\_\_\_\_

\_\_\_\_\_ I give permission for my child to ride with \_\_\_\_\_, a 4-H'er who will be driving to/from the above 4-H function. I understand the route and stops they will be making. I understand the following people will be in the automobile with my child and the 4-H'er who is driving (listed above): \_\_\_\_\_

\_\_\_\_\_ My child will arrive at a different time than the county group to the above 4-H function. Approximate date and time of arrival will be \_\_\_\_\_.

\_\_\_\_\_ My child will leave at a different time than the county group from the above 4-H function. They will be picked up at \_\_\_\_\_ by **(photo ID will be required)** \_\_\_\_\_.

Name	Relationship	Phone	Make/Model/Color of Car

\_\_\_\_\_  
Printed name of parent/guardian giving permission

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent/guardian giving permission

\_\_\_\_\_  
Phone number of driver

\_\_\_\_\_  
County office contact aware of arrangement

\_\_\_\_\_  
Phone number of county office contact

\_\_\_\_\_  
County office contact signature

\_\_\_\_\_  
Comments from parent/guardian or county staff: