



*Driver Authorization Form

Camp Date: (circle all that apply)

June 22nd - June 26th

June 29th - July 3rd

July 6th - July 10th

July 20th - July 24th

August 3rd - August 7th

August 10th - August 14th

August 17th - August 21st

August 24th - August 28th

Driver Information

Child's Name: _____ Gender: (Circle) Female Male

Date of Birth: _____

Parent's Name _____

Address: _____

City: _____ State: _____ Zip _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Fax: _____ Email: _____

Model, Make and Year of Car Driven: _____

Driver Permission (Adult Driver)

I _____ (parent/guardian) am the parent or legal guardian of

_____ (minor child). I give my permission for

_____ (name of driver) to drive my minor child to the Discovery Sports Center

for the Discovery Sports Center Multi-Sport Camp(s) held on June 16-June 20, June 23-June 27,

June 30-July 3, July 7-July 11, July 28-Aug 1, Aug 4-Aug 8, Aug 11-Aug 15, and/or

Aug 18-Aug 25 and to sign my child in and out for the day. He/she is related to my child in the

following way _____ (ex. Aunt, babysitter, friend of family, etc.) I agree that my

child will be at the Discovery Sports Center between the hours of 9:00am and 4:00pm and do not have my

permission to leave before 4:00pm when the camp is over. I do not give permission for any other people

that may drive with him/her. I realize that individual permission for each person must be granted by their

respective parent/guardian. I agree that neither the Maryland Soccer Foundation, Discovery Sports

Center, Maryland SoccerPlex and their agents, sponsors and employees may be held responsible should

an accident occur.

Signature: _____ Date: _____

Print Name: _____

***Only needed if someone other than your child's parent or guardian will be picking up or dropping off your child**