



*Driver Authorization Form

Camp Date: (circle all that apply)

June 21st - June 25th

June 28th - July 2nd

July 5th - July 9th

July 12th - July 16th

August 2nd - August 6th

August 9th - August 13th

August 16th - August 20th

August 23rd - August 27th

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**