

Swimmer's Full Name	

## <u>Written Permission for an Unrelated Adult Athlete to Share the Same Hotel, Sleeping Arrangement or Overnight Lodging with Minor Athlete</u>

I,, parent or legal guardian of a minor athlete	
(swimmer's name), born	(birth date) give express
written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for	
(minor athlete), to stay in the same hotel room of	of, or share a sleeping
arrangement or other overnight lodging location with	(unrelated adult athlete
for all In-Program sport activities related to The Dolphins Swim Team.	
I understand that my minor athlete or I can withdraw consent at any time.	
This authorization is good for ONE YEAR from date signed below.	
► Parent/Guardian's signature: Date	e: