## PEAK'S PERMISSION FOR A LICENSED MASSAGE THERAPIST OR OTHER CERTIFIED PROFESSIONAL OR HEALTH CARE PROVIDER TO TREAT A MINOR ATHLETE



l,	, legal guardian of	,
a minor athlete, give express writte	n permission, and grant an	exception to the Minor Athlete
Abuse Prevention Policy for	(n	nassage therapist or other certified
professional) to provide a massage	e, rubdown and/or athletic tr	raining modality on
	(minor athlete) on	(date)
at	(location). The massage	e, rubdown or athletic training
modality must be done with at leas	t one other adult present in	the room and must never be done
with only	(minor athlete) a	nd
(massage therapist or other certifie	d professional) in the room	. I acknowledge that I have the
right to observe the massage, rubd	lown or athletic training mod	dality. I further acknowledge that
this written permission is valid only	for the dates and location	specified herein.

Legal Guardian Signature:

Date: \_\_\_\_\_

## <u>PEAK'S PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO TRAVEL TO</u> <u>COMPETITION ALONE WITH MINOR ATHLETE</u>



l,	, legal guardian of,
a minor athlete, give express written	permission, and grant an exception to the Minor Athlete
Abuse Prevention Policy for	(minor athlete), to travel with
	_(Applicable Adult), to travel from
(point of origin) to	(destination) to attend the
	_(name of competition)
from to (dates	of travel to competition).
I acknowledge that	(minor athlete) cannot share a hotel room,
sleeping arrangement or other overn	ight lodging location with
(Applicable Adult) at any time. I furthe	er acknowledge that this written permission is valid only for
the dates and location specified here	in.
Legal Quardian Signatura	

Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## <u>PEAK's PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO PROVIDE LOCAL</u> <u>TRANSPORTATION TO MI</u>NOR ATHLETE



l,		,
a minor athlete, give express w	ritten permission, and grant	an exception to the Minor Athlete
Abuse Prevention Policy for		, an unrelated Applicable Adult to
provide local vehicle transporta	ition to	(minor athlete)
to	(destination) on	(date(s))
at(approximate tin only for the transportation on th		e that this written permission is valid specified location.

Legal Guardian	Signature:	

Date: \_\_\_\_\_