

**Transportation  
Waiver**

Permission is granted for \_\_\_\_\_ as a part of J. T. Locke Resource Center, Inc. Afterschool Program to participate in the tutoring program beginning on: \_\_\_\_\_(date).

I give authorization for JT Locke Resource Center, Inc. it employees, agents and or members to transport my child from \_\_\_\_\_(school) to the tutoring/mentoring program located at 300 Powell Drive, Raleigh, NC. At the end of the session my child is to be taken to \_\_\_\_\_(resident/home).

By signing this document, I hereby expressly waive and release any and all rights or claims of any nature whatsoever I may have against the J. T. Locke Resource Center, Inc. its members, employees arising out of, in connection with or resulting from the above tutoring/mentoring program:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian