

**SK CARPOOL AUTHORIZATION FORM**



**Child's Name** \_\_\_\_\_ **Child's Catechist** \_\_\_\_\_

I authorize the following people to carpool my son/daughter to and/or from classes and other activities sponsored by Saint Kateri Faith Formation Program. I realize that Saint Kateri and the Diocese of Paterson will not assume any liability in the event of a motor vehicle accident.

**Parent or Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please note if there is a custodial problem & you DO NOT want a Mom or Dad to have this authority.

Name	Phone #	Relationship

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