



**AUTHORIZATION FOR PARTICIPANT PERSONAL TRANSPORTATION**

Participant's Name \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Home Address \_\_\_\_\_  
\_\_\_\_\_

Parent/Legal Guardian #1\*: Name \_\_\_\_\_  
Phone Numbers (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
Parent/Legal Guardian #2\*: Name \_\_\_\_\_  
Phone Numbers (work) \_\_\_\_\_ (cell) \_\_\_\_\_

(\* At least one guardian information is required.)

I hereby authorize the following person(s) to pick up my son/daughter on my behalf or in case of an emergency. I further understand that Keio Academy of New York is not responsible for anything that may occur during the transportation of the participant before his/her arrival on campus on the arrival date or after the departure from campus on the departure date.

- 1. Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_
- 2. Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

No person(s) other than the person(s) named above is authorized to transport my son/daughter for any reason.

\_\_\_\_\_  
Name of Parent/Legal Guardian (Please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date