

GUARDIAN CHRISTIAN ACADEMY

6851 COURTHOUSE ROAD
CHESTERFIELD, VIRGINIA 23832
TEL: 804-715-3210 / FAX: 804-715-3237
www.gcakids.com



ATHLETIC TRAVEL ARRANGEMENTS

Under the leadership of Athletic Director, Doug Dillon, Guardian Christian Academy is pleased to offer a competitive sports program. We are even more pleased to see students become interested in sports and the physical, social, emotional, and mental benefits that result from participation.

GCA owns and operates vehicles which are used for field trips and before and after school care transportation, as well as for sports. However, due to scheduling difficulties not all needs can be accommodated. For the benefit of the athletes, Coach Dillon desires that the group travel as a team, perform as a team, and celebrate as a team whenever possible. However, while striving for the ideal, there will be times when this is not possible and parents will need to transport their own children to and from the events. Listing other parents you know well for authorized pickup and transport alleviates some of the challenges for working parents and those with GCA siblings.

It is important to verify that the procedures listed in the Athletic Handbook are understood.

Athletes traveling as a team to a contest: Athletes leave from GCA together, stay together at the host site, and after playing: 1) Are signed out at the event site by the parent or an authorized person *as listed on the authorized pick up to return home, or 2) Ride back to GCA in the school vehicle where the student is signed out by the parents or an authorized person from the pick up list.

Athletes transported by parents to the contest: Athletes are checked out at GCA's dismissal tables as usual by either the parent or an authorized person*. The supervising parent/authorized person transports the athlete to the event site, remains on the premises during the contest and related activities, and takes his/her athlete home at the conclusion.

** Per Student Handbook, in an emergency situation authorized persons may also accept medical treatment on behalf of the student*

For the ease of the Athletic Department, please **clearly print** below those who you authorize to pick up, transport, and accept treatment on behalf of your child to and from school/athletic events during the 2018-2019 school year, ending August 31, 2019.

Name	Relationship	Contact Phone No.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand and accept the procedure/process as described above in regards to: 1) the transportation to and from a sports event, and 2) who has responsibility for my child during this time.

Student's Printed Name _____ *Date*

Parent's/Guardian's Printed Name _____ *Date*

Parent's/Guardian's Signature _____ *Date*

Equipping students to become Christian leaders who impact the culture for Christ