**Logo, company name

Description automatically generated**

**Legal Guardian Authorization for MAAPP 2.0 Exception  
*Local Repeated Practice Vehicle Transportation with Unrelated Adult Participant***

I, *Parent/Guardian's Name*, legal guardian of *Minor Athlete's Name*, a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy (MAAPP 2.0) for *Individual Providing Transportation*, an unrelated adult participant, to provide local vehicle transportation for *Minor Athlete's Name* to and/or from swim practices between the dates of *Beginning Date* and *Ending Date*. I further acknowledge that this written permission is valid only for the transportation to the scheduled team practices between the specified dates.

Legal Guardian Signature:

Date:

*This waiver must be filled out each season (September through March and April through August) and remain on file with Irish Aquatics. Please send the completed form to Coach Matt (*[*coachmatt@irishswimming.org*](mailto:coachmatt@irishswimming.org)*) and the Safe Sport Chair (*[*safesport@irishswimming.org*](mailto:safesport@irishswimming.org)*).*