

CTS Carlos Transportation Service

MINOR RELEASE FORM

Toll Free: 855-733-0118 ~ Phone: 818-538-5122 ~ Fax: 818-538-5122 ~ www.carlostrans.com ~ info@carlostrans.com

The process of this application requires a Physical Signature.
Please complete the entire application, print it, sign it and fax it to 818-538-5122

I understand that Carlos Transportation Services will be providing transportation for minors on _____
Parental permission is required on all transportation without adult supervision for minors under the age of 18 years old and For minors under the age of 16 with adult supervision. This is a complete and full release of all claims regarding the transportation.
I release Carlos Transportation Service and all agents and owners from all claims and liability.

Parent(s) Signature

Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>

(If more space is needed, please attach additional sheet)

Names of Passengers

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
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(If more space is needed, please attach additional sheet)

Comments or Changes:

We Appreciate Your Business