



**Carpool  
2018-19**

\_\_\_\_\_ Yes, I am interested in carpooling with other Seton Catholic parents.

I give my permission for my name, my student's name, address, and telephone number to be given to others interested in carpooling.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Student's Name (Please Print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Signature

**We will compile a list of all families interested in carpooling (with addresses). We will email this list to everyone before school begins in the fall.**