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**Legal Guardian Authorization for MAAPP 2.0 Exception
*Minor Athlete Lodging with Close-In-Age Adult Athlete on Team Travel***

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 *Minor Athlete's Name* to share overnight lodging accommodations in the same room with *Adult Athlete Name(s)* at *Lodging Location* from *Beginning Date* to *End Date*. I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature:

Date:

*This waiver must be filled out for each team travel trip and will remain on file with Irish Aquatics. Please send the completed form to Coach Matt (**coachmatt@irishswimming.org**) and the Safe Sport Chair (**safesport@irishswimming.org**).*