



**Emergency Medical Services  
for Children Program**  
Maryland Institute for Emergency Medical  
Service Systems



**BeTWEEN Riding & Driving: youth occupant protection program**

Parental Permission Form

As the parent/guardian of \_\_\_\_\_, I give my consent to his/her participation in the BeTWEEN Riding & Driving program taught on \_\_\_\_\_ (date) at \_\_\_\_\_ (location).

I understand that motor vehicle crashes are the leading cause of death among kids ages 1-14 years, and that occupant protection measures are highly effective at preventing these deaths and injuries. I have been informed that the goals of this program are to educate youth about riding in vehicles more safely and to teach skills to be safer passengers. Topics will include: safety belt use, minimizing distractions to the driver, airbag safety, and what to do if the driving situation is unsafe, such as when the driver is impaired.

I also understand that studies show parents and healthcare providers to be significant influences on how a child learns safety behaviors, and I agree to be a part of my child's learning process in this program by:

- participating in the safer passenger pledging process (15 minutes) at the end of the session, which includes,
- setting rewards for my child's compliance in good passenger behavior, and
- setting and upholding penalties for my child's non-compliance.

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Parent/Guardian's Signature

Date