

TRAVEL AND ACTIVITY AUTHORIZATION

_____ Blanket Permission for this Activity
_____ Special One -time Permission Only
 X Blanket Permission for All Given Activities

Name of Child: _____

Date: _____

I, _____ parent/guardian of _____
(name of parent/guardian) (name of child)

give my permission to _____ for my child to participate in the following activities:

Trips in the van/ automobile (facility or parent owned):

(Explain planned activity; where and when)

Field trips away from the facility:

(Explain planned activity; where and when)

I understand that the facility will use the appropriate child restraint devices and abide by all the safety rules in Rule .1000 when my child is transported in a vehicle. The facility will also notify me each time my child is to participate in an activity that would involve transportation.

Signature of Parent/ Guardian: _____

Date Signed: _____

This authorization is valid from: _____/_____/_____ to _____/_____/_____

Authorization to Play Outside Fenced Area of Facility

In addition, if the facility has planned activities outside the fenced area of the facility:

 X I will allow my child to play outside the fenced are; or

_____ I will not allow my child to play outside the fenced area

Signature of Parent/ Guardian: _____

Date Signed: _____

This authorization is valid from: _____/_____/_____ to _____/_____/_____

