

WALKING PERMISSION SLIP

I, _____ give permission for my
child, _____ to take walks in
the local area around the Early Learning Center. I understand that Staff will never venture
alone with a group of children. The Staff will have a cell phone with them in the event that
they need to contact the Administrator on Duty.

Furthermore, the Administrator on Duty will have knowledge of both the route, time
leaving and expected time of return. Staff will have a first aid kit with them as well as
water and snacks.

Parent's signature _____

Date _____

Parent Contact Information

I would like my contact information made available to the parents in my child's class?

Yes _____

No _____