

Date: _____

I, _____, give my child(ren)
(Parent/Guardian)

(child's name)

(child's name)

(child's name)

(child's name)

permission to:

Arrive independently – expected time of arrival is _____ **A.M.** or **P.M.**

Depart independently – expected time of departure is _____ **A.M.** or **P.M.**

Details: (i.e. day(s) of the week the child(ren) will be arriving and/or departing, method of transportation etc.)

I confirm my understanding that my child(ren) is not under the care of the After School program or their staff while independently travelling to or from the program site. Therefore, I will not hold the program responsible for the well-being of my child(ren) until they are physically in the program area.

Parent/Guardian Signature: _____

Expiry Date: _____ (expires one year after Initial Date)