

## Permission Form for Children to go Off-Premises

Name of the Facility (exactly as stated on the license)			License #	
Street Address of the Facility	City	Zip Code	County	

\_\_\_\_\_ may go to the following locations off the premises with adult supervision:

**First and Last Name of Child or Youth**

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
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Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

**For School Age Children or Youth Only**

I hereby authorize my school age child

\_\_\_\_\_  
First and Last Name of Child or Youth

\_\_\_\_\_  
Birth Date MM/DD/YYYY

To walk/bike to and from the following location(s) without adult supervision:

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	