



TRAVEL AND ACTIVITY AUTHORIZATION

Please initial one:

| | |
|---|--|
| Blanket Permission for one activity | |
| Blanket Permission for all given activities | |

I _____, parent/guardian of _____ give my permission
(Name of parent/guardian) (Name of child)

To Success Institute Charter School and PDYF Enrichment Day Care Program for my child to participate in the following activities:

Trips in the van/bus (facility owned or rented)

(List activity if one-time permission only)

Field Trips away from the facility

(List activity if one-time permission only)

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

Parent/Guardian Signature Date

The authorization is valid from ____/____/____ to ____/____/____

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

Please initial one:

| | |
|--|--|
| I will allow my child outside the fenced area | |
| I will not allow my child to play outside the fenced area. | |

Parent/Guardian Signature Date

The authorization is valid from ____/____/____ to ____/____/____