

## ACTIVITY/VOLUNTEER PERMISSION FORM

School Year: 2023/24

School:	Date:
I give my child,	
permission to leave the Before/After Care are	a for the following:
Activity:	
Activity Start Date:	Activity End Date:
Days of Week:	
Departure Time from B/A:	
Return Time to B/A:	
Location of Departure/Return:	
(i.e. Room number, front door, etc.)	
	for attendance in Before/After Care before being escorted by an locations and will be escorted back to the Before/After Care area as completion.
and sign my child back in when they return to still at the above activity or in the process of	er must sign my child out when leaving the Before/After Care area to the Before/After Care area. I also understand that if my child is helping their teacher when I arrive to pick him/her up, I must go I inform a ActivKids Program staff member that my child is leaving
·	ool activity including the school breakfast program, your child will ed up or escorted by an ActivKids Program Staff Member.
Parent/Guardian Signature:	
Please note: Signing this form releases the Ca	rol Stream Park District from any liability while your child is not

Print this form and provide it to the ActivKids Site Coordinator at your child's school or email it to info@csparks.org.



present during program hours due to participation in other school activities.