CCL. 034 Rev. 3/2017

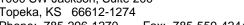
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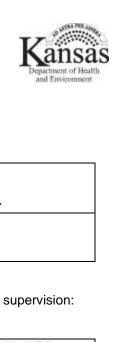
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Kansas Department of Health and Environment
Bureau of Family Health
Child Care Licensing Program
1000 SW Jackson, Suite 200
Topeka, KS 66612-1274
Phone: 785-296-1270 Fax: 785-559-4244
Website: www.kdheks.gov/kidsnet







PAREN	NTAL PERMISS	SION FORM FOR (OFF-PREM	ISES TRIF	PS	
Name of the Facility (exactly as stated on the license)					License #	
Christ Lutheran Early Educ	ation Center				0007159-00)4
Street Address of the Facility		City		Zip Code		-
11720 Nieman Road		Overland Park		66210 Johnson		n
**In the event of an emergency e	vacuation and	/or a drill practici	ng an eme	ergency e	vacuation.	
		go to the following	g locations	off the pre	mises with adu	ult supervision:
First and Last Name of Child or	Youth					
Place Burlingame & Mock Vision Street Address		11500 W. 119th City Overland		Park	By Vehicle	Walk/Bike Walk
Signature of Parent or Guardian				Date Signed		
Place	Street Address	<u> </u>	City		By Vehicle	Walk/Bike
Homestead of Overland Park	117	701 Nieman Road	Overland F	Park		Walk
Signature of Parent or Guardian					Date Signed	
Place	Street Address		City		By Vehicle	Walk/Bike
The Sheridan Signature of Parent or Guardian	1030	0 Indian Cr. Pkwy	Pkwy Overland Park		Date Signed Walk	
Signature of Farent of Guardian					Date Signed	
Students will walk throughout the campus of Ch	rist Lutheran Churc	h & Educ. Ctr. where s	chool age child	dren may be	present while bein	g supervised by CLEI
Place	Street Address		City		By Vehicle	Walk/Bike Walk
Christ Lutheran Church Signature of Parent or Guardian	117	720 Meman Road	Overland	-ark	Date Signed	vvaik
Place Christ Lutheran School	Street Address	s 720 Nieman Road	City Overland F	Park	By Vehicle	Walk/Bike Walk
Signature of Parent or Guardian			Overland	aik	Date Signed	
Place	Street Address	<u> </u>	City		By Vehicle	Walk/Bike
Signature of Parent or Guardian				Date Signed		
Diago	Canada A.I.I.		City		Dw Valeto I	Mall-/D!
Place	Street Address	5	City		By Vehicle	Walk/Bike
Signature of Parent or Guardian					Date Signed	1

	Street Address	City	By Vehicle	
Signature of Parent or Guardian			Date Signed	
Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian	Date Signed			
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Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian	Date Signed			
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Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian	Date Signed			
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Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian	Date Signed			
			•	
	OR SCHOOL AGE CHIL	DREN OR YOUTH O	 NLY	
	child		NLY	
F I hereby authorize my school age o				ite MM/DD/YYYY
	child First and Last Name (of Child or Youth		ite MM/DD/YYYY
I hereby authorize my school age o	child First and Last Name (of Child or Youth		ite MM/DD/YYYY Walk/Bike
I hereby authorize my school age o To walk/bike to and from the followi	childFirst and Last Name on the control of	of Child or Youth t supervision:	Birth Da	
I hereby authorize my school age of the following the following place	childFirst and Last Name on the control of	of Child or Youth t supervision:	Birth Da	
I hereby authorize my school age of the following the following place	childFirst and Last Name on the control of	of Child or Youth t supervision:	Birth Da	
I hereby authorize my school age of To walk/bike to and from the following Place Signature of Parent or Guardian	First and Last Name on specific street Address	of Child or Youth t supervision:	By Vehicle Date Signed	Walk/Bike
I hereby authorize my school age of To walk/bike to and from the following Place Signature of Parent or Guardian Place	First and Last Name on specific street Address	of Child or Youth t supervision:	By Vehicle Date Signed By Vehicle	Walk/Bike
I hereby authorize my school age of To walk/bike to and from the following Place Signature of Parent or Guardian Place	First and Last Name on specific street Address	of Child or Youth t supervision:	By Vehicle Date Signed By Vehicle	Walk/Bike
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