CCL. 034 Rev. 3/2020

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



PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS

Name of the Facility (exactly as stated on the license)						License #		
Christ Lutheran Early Education Center						0007159-023		
Street Address of the Facility		City		Zip Code	ode Cour		ounty	
11720 Nieman Road		Overland Park		66210		Johnson		
Vg.			1180					
First and Last Name of Child or		go to the followir	ng locations o	off the pre	mises wi	th adul	t supervision:	
First and Last Name of Child of	Toutii						1 %	
Place Burlingame & Mock Vision	Street Address 1150 W. 11		City Overland Park		By Vehicle		Walk/Bike Walk	
Signature of Parent or Guardian					Date Signed			
Place Homestead of Overland Park	Street Address 117201 Nieman Road		City Overland Park		By Vehicle		Walk/Bike Walk	
Signature of Parent or Guardian					Date Signed			
Place Alto Senior Living	Street Address City 10300 Indian Cr. Pkwy Overland			d Park			Walk/Bike Walk	
Signature of Parent or Guardian					Date Signed			
Students will walk throughout the campus of C	hrist Lutheran Churc	ch & Educ. Ctr. where	school age child	ren mav be	l present wh	ile super	vised by CLEEC st	
Place		Street Address		City		icle	Walk/Bike	
Christ Lutheran Church	11720 Niema	11720 Nieman Road Overland Park		Park			Walk	
Signature of Parent or Guardian					Date Signed			
						2.		
Place	Street Addres		City	d Park	By Veh	icle	Walk/Bike Walk	
Christ Lutheran School 11720 Nieman Road Overland Park Signature of Parent or Guardian					Date Signed			
					ļ			
Place	Street Addres	<u> </u>	City		By Veh	icle	Walk/Bike	
			,					
Signature of Parent or Guardian					Date Signed			
Place	Street Addres	s	City		By Veh	icle	Walk/Bike	
Signature of Parent or Guardian					Date Signed			