PERMISSION TO TRANSPORT TO SCHOOL

Child's Name	Chi	ld's School	
Circle One: Traditional			
Custodial Parent #1		_ Daytime Phone	
Custodial Parent #2		_ Daytime Phone	
I give my permission for Learning	g Tree Schools to transpo	rt my child to and f	rom Elementary School.
I understand that transportation is transportation may also be by a d in the event of any injury to my c	irector's car. I agree to ho	ning Tree bus or mi old harmless Learnin	nivan. I understand that ng Tree and its employees
I have read the Learning Tree Tra rules with my child and support t			them. I will discuss the bus
I understand that Learning Tree v school's beginning and ending time		icking up my child	within 10 minutes of the
I understand that my child must be leave to pick up children at other child, I agree to pay a \$10 fee.			
I understand that it is my respons schedule. If school is dismissed e Learning Tree in advance.			
I give permission for the staff at l appropriate medical facility in the		transport my child	to the nearest or most
I understand that in the event of a authorize the staff at Learning Tr			
I hereby authorize treatment for n nurses, paramedics and other eme and its employees in the event of	ergency team members. I	agree to hold harml	ess Learning Tree Schools
If the custodial parents of my chi emergency.	ld cannot be reached I au	thorize these person	s to be called in an
Name	Relation to chil	d Day	time Phone
Name	Relation to chil	d Day	time Phone
This form may only be signed	by a person having leg-	al custody of the c	<u>hild</u> .
Parent Signature		Date	