

AUTHORIZATION FOR TRANSPORTATION/ACTIVITY

Complete to inform of after school activities or to allow child to leave program for specific activities with specific people. Examples: Game Bot, Orchestra, Band, Chess, Piano Lessons, Tutoring, other Camps, etc.

Destination/Activity _____ Departure Time _____ Return Time _____

Date Activity Starts _____ Day(s) of the week _____ # of Sessions _____

Dismissal from Activity to BeeKeepers: **Yes** or **No** Picked up from Activity by parent or Guardian: **Yes** or **No**

Name(s) of approved individual(s) picking up: _____

Destination/Activity _____ Departure Time _____ Return Time _____

Date Activity Starts _____ Day(s) of the week _____ # of Sessions _____

Dismissal from Activity to BeeKeepers: **Yes** or **No** Picked up from Activity by parent or Guardian: **Yes** or **No**

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Dismissal from Activity to BeeKeepers: **Yes** or **No** Picked up from Activity by parent or Guardian: **Yes** or **No**

Name(s) of approved individual(s) picking up: _____

Parent Signature: _____ Date: _____