

Parent's Name

Creative Paths Learning Studio



Parent's Signature

Walking Field Trip Permission Slip

hereby give my permission for my child,,
o go with his/her class on any walking field trips planned and conducted by the teachers of
reative Paths Learning Studio during their enrollment in the school. I understand that these are valking trips in which the children are securely strapped into a stroller/buggy/wagon. I understand hat adequate health and safety precautions will be taken, and that all DCFS rules, regulations, and rocedures will be followed while on these walking field trips.
Date
Child's Name