EVERGREEN CHILDREN'S CENTER PERMISSION FORM

CLASS: _____ FIELD TRIP/SWIM SITE:_____ DATE:_____

FOR: FIELD TRIPS; ACTIVITIES NEAR WATER TWO OR MORE FEET IN DEPTH (even if no water activities are planned); SWIMMING ACTIVITES; OR TODDLERS USE OF WADING POOLS. We shall provide an extra adult or half ratios will be maintained at the Greene County Pool. The center's bus, directors vehicle; or parent vehicle will be used to transport the children.

DEPARTURE AND ARRIVAL TIMES:_____

By signing this form my child has permission to participate on the trips listed above.

CHILD'S NAME	PARENT SIGNATURE	DATE	CHILD'S BIRTH DATE	MY CHILD IS A SWIMMER/ NON-SWIMMER

PARENTS WHO WOULD LIKE TO GO ALONG:

_____

_____

Rev 8/09