

HENNEPIN COUNTY
HUMAN SERVICES AND PUBLIC HEALTH DEPARTMENT
CHILD CARE LICENSING PROGRAM
TRAVEL AND ACTIVITY AUTHORIZATION

_____ I give permission for my/our child, _____, age _____, to leave the family child care home for travel in a car or on public transportation for any reason. Conditions under which children are transported are described under the Provider Policies. (9502.0435 Subp. 9 D.)

_____ I give permission for my/our child, _____, to walk to and/or participate in activities geared for my child but away from the child care home under the supervision of a provider or adult helper. My provider will inform me in advance of field trips beyond the immediate neighborhood.

_____ I give permission for my school-aged child, _____, to participate in _____, outside the residence. I understand my child will not be under the supervision of the child care provider, substitute, or helper. (9502.0415 Subp. 12.)

(Name of activity)

supervision of the child care provider, substitute, or helper.
(9502.0415 Subp. 12.)

(Date)

(Signature of Parent)