



**PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS**

Name of the Facility (exactly as stated on the license)			License #	
Learn & Grow Child Care Center			0056796-	
Street Address of the Facility	City	Zip Code	County	
1020 N. 2nd Ave	Mulvane	67110	SG	

\* \_\_\_\_\_ may go to the following locations off the premises **with** adult supervision:  
First and Last Name of Child or Youth

Place	Street Address	City	By Vehicle	Walk/Bike
Nature Walk	1020 N. 2nd Ave	Mulvane		<input checked="" type="radio"/>
Signature of Parent or Guardian			Date Signed	
			*	

Place	Street Address	City	By Vehicle	Walk/Bike
Munson	1007 Westview	Mulvane		<input checked="" type="radio"/>
Signature of Parent or Guardian			Date Signed	
			*	

Place	Street Address	City	By Vehicle	Walk/Bike
Dollar General	613 N. 2nd Ave	Mulvane		<input checked="" type="radio"/>
Signature of Parent or Guardian			Date Signed	
			*	

Place	Street Address	City	By Vehicle	Walk/Bike
Mulvane Public Library	408 N. 2nd Ave	Mulvane		<input checked="" type="radio"/>
Signature of Parent or Guardian			Date Signed	
			*	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	