
Excursion and Transportation Consent

(Required Form)

I hereby give permission to AUGUST HOME DAYCARE
(Name of child care provider)

for my child _____ for the following:
(Name of child)

to participate in excursions, not involving transportation or neighbourhood walks:

Yes

No

to participate in excursions involving public or private transportation

Yes

No

Comments or Exceptions:

Date: _____

Parent/Guardian Signature _____

Note: When a parent or guardian does not authorize his/her child to participate in an excursion, AUGUST HOME DAYCARE will provide alternate care.

