

**Neighborhood Walking Field Trip Permission**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

has my/our permission to participate in all activities within walking distance of school. He/she may walk with his/her teacher at those times when it is necessary to include the Pine Street Church Campus and to walk into or nearby the downtown area as part of the school day.

I/we understand that all reasonable precautions will be taken by Off Broadway Preschool staff, employees and volunteers to avoid any injury to my child. In consideration thereof, I/we waive any claims for damage and/or injuries that may arise from or maybe incident to the activities described above to the extent allowed by law.

I/we further understand that Off Broadway Preschool staff, employees, or volunteers may not be held responsible for the intentional or negligent acts from other persons who are not its staff, employees, or volunteers.

**Parent signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_**

\* If you do not want your child to walk around the Pine Street Church campus or downtown area, do not sign this. Your child will sit in the office, not come on the day the activity is planned, or will walk only with you for these activities.