



PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS

Name of the Facility (exactly as stated on the license) Kids Kampus Inc Kids Kampus School Age Program			License # 0080977 0080979	
Street Address of the Facility 1381 S Main St 1010 S Maple	City McPherson	Zip Code 67460	County McPherson	

_____ may go to the following locations off the premises **with** adult supervision:

First and Last Name of Child or Youth

Place RES (Roosevelt Elem)	Street Address 800 S. Walnut	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place WES (Washington Elem)	Street Address 128 N. Park	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place EES (Eishenhower Elem)	Street Address 301 Wickersham	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place LES (Lincoln Elem)	Street Address 900 S. Ash	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place St. Joseph	Street Address 520 E. Northview	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place McPherson Public Parks	Street Address within city limits	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place YMCA	Street Address 200 N. Walnut	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place McPherson Public Library	Street Address 200 N. Marlin	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place City Pool	Street Address Euclid & Lakeside	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place Central Christian College	Street Address 1200 S. Main	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place Ms. Wanda's Home	Street Address 1272 19th Ave	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

Place Free Methodist Church	Street Address 1010 S. Maple St	City McPherson	By Vehicle X	Walk/Bike X
Signature of Parent or Guardian			Date Signed	

FOR SCHOOL AGE CHILDREN OR YOUTH ONLY

I hereby authorize my school age child _____
First and Last Name of Child or Youth
Birth Date MM/DD/YYYY

To walk/bike to and from the following location(s) **without** adult supervision:

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	

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