

## Permission Slip- (please complete one form for each child you have enrolled)

	Student Info	ormation
Students Full Name:		Date of Birth:
Last	First	M.I.
Home Address:		
	General Permission	-Basic Transport
(Parents should not sign tl specific places he/she plan		ucator makes a specific request or provides a list of
, hereby give	Montessori Escuela LLC (School)	permission to take my
		he premises of the school program for
(Na	ime of Child)	
the following excursions (sp	pecific place your child will go):	Beaver Brook Spray Deck & Playground
		(Location)
using the following form(s) of transportation:		
		(Transportation)
Parent/Guardian Signature		Signature Date
□ I do not want my child	taken off of the school premises	
Parent/Guardian Signature		Signature Date