



Explorations Child Enrichment Center

Permission to transport

I give permission for Explorations Child Enrichment Center to transport my child to and/or from school.

Child's Name

School's Name

_____ I need morning drop off to school. ****Your child must be at Explorations by 7:15 am**

My child is a kindergartener and will need _____ / _____ from: am / pm kindergarten.
drop off / pick up / circle am or pm

_____ I need afternoon pick up

I need transportation on M T W Th F

Parent's Signature