CCL. 034
Rev. 8/2013

Kansas Department of Health and Environment
Bureau of Family Health
Child Care Licensing Program
1000 SW Jackson, Suite 200
Topeka, KS 66612-1274
Phone: 785-296-1270 Fax: 785-296-0803
Website: www.kdheks.gov/kidsnet

PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS

Name of the Facility (exactly as stated on the license)			License #
Linwood Recreation Center			0000377-008
Street Address of the Facility	**City**	**Zip Code**	**County**
1901 S. Kansas	Wichita	67211	Sedgwick

_____may go to the following locations off the premises **with** adult supervision:
First and Last Name of Child or Youth

Place	Street Address	City	By Vehicle	Walk/Bike
Sedgwick County Zoo	5555 W. Zoo Blvd.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
All Star Adventures	1010 N. Webb Rd.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
All Star Sports	8333 W. 21st North	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Carousel Skate Center	312 N. West St.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Palace West Movie Theater	535 South Ridge Rd.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Rock River Rapids	1900 James St.	Derby	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Seneca Bowl	1909 S. Seneca	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Exploration Place	300 N. McLean Blvd.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Wichita Wingnuts Game	300 S. Sycamore	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Watson Park	3022 S. McLean Blvd.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Butler Community College Culinary School	6655 E. Zimmerly	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Funtastics	404 N. River St.	Derby	Yes	
Signature of Parent or Guardian			**Date Signed**	

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