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 #
Edgemoor Recreation Center			0000155-008
Street Address of the Facility	**City**	**Zip Code**	**County**
5815 E. 9th St.	Wichita	67208	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
Wellington Water Park	1101 W. Harvey	Wellington	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
MacDonald Golf Course	840 N. Yale	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Aviate Extreme Air Sports	2668 N. Greenwich Rd. Ct.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Tanganyika Wildlife Park	1037 S. 183rd St. W.	Goddard	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Great Plains Nature Center	6232 E. 29th St. N.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Sedwick County Extension Office	7001 W. 21st St. N.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
South YMCA	3405 S. Meridian	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
The Bug Lady	7230 E. 29th St. N.	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Dart Warz	6803 Taft St. Suite 407	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Boston Pool	6700 E. Boston	Wichita	Yes	
Signature of Parent or Guardian			**Date Signed**	

Place	Street Address	City	By Vehicle	Walk/Bike
Rockwell Library	5939 E. 9th	Wichita		Walk
Signature of Parent or Guardian			**Date Signed**	

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

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