



PARENTAL PERMISSION FORM FOR OFF-PREMISES TRIPS

Name of the Facility (exactly as stated on the license)			License #	
Orchard Recreation Center			0000446-010	
Street Address of the Facility		City	Zip Code	County
4808 W. 9th St.		Wichita	67212	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
Tex Consolver Golf Course	1931 S. Tyler	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
Sedgwick 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 The Bug Lady	Street Address 7230 E. 29th St. N.	City Wichita	By Vehicle Yes	Walk/Bike
Signature of Parent or Guardian			Date Signed	

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

Place Orchard Pool	Street Address 1062 N. Clara	City Wichita	By Vehicle	Walk/Bike Walk
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	

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	