## Off Premise Activity Permission

A. Parent and Child Information	1				
		☐ Emergency Contact		Telephone Number - Primary	
Name of Child	□ Picture attached		Telephone Number - Secondary		
D. Consumer Construct Information	: /				
B. Emergency Contact Information (non-parent)			Telephone Number		
Name			relephone Number		
C. Authorized Destination and I	Departure an	d Return Ti	mes		
Location of off premise activity	Departure Ti		me	Return Time	
D. Daront Signature and Data					
D. Parent Signature and Date	aiva datal ta [aiv	ro dotal			
Permission to participate is valid from [ From To	(up to 12 months)				
Signature of Parent or Guardian			Date		
Signature of Furences Guardian					
NC Division of Child Development and Early Education  Off Premise Act Permission			•		
A. Parent and Child Information	1				
Name of Parent	□ Emerge	□ Emergency Contact		Telephone Number - Primary	
Name of Child	□ Picture	□ Picture attached		Telephone Number - Secondary	
B. Emergency Contact Informat	ion (non-pare	ent)	T		
Name			Telephone Number		
C. Authorized Destination and I	Departure an	d Return Ti	mes		
Location of off premise activity		Departure Tir		Return Time	
D. Parent Signature and Date		ı		I	
Permission to participate is valid from [give date] to [give date].					
From To	(up to 12 months)				
Signature of Parent or Guardian			Date		