



# Lake County YMCA Release To Walk To Destination Form 2026/2027 School Year

FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

**DATE OF PERMISSION:** \_\_\_\_\_  
(Valid for One Year)

## CHILD'S NAME

FIRST		LAST	M.I.
AGE	DATE OF BIRTH	GENDER	

## SCHOOL AGED CHILD CARE

LOCATION
<input type="checkbox"/> GRANT <input type="checkbox"/> EDISON <input type="checkbox"/> JEFFERSON
<input type="checkbox"/> LONGFELLOW <input type="checkbox"/> ROYALVIEW

### Destination:

- To parent pick-up area

### Mode of Transportation:

- Walking

By signing below, I hereby give my child, named above, permission to leave the YMCA School Aged Child Care (YSACC) program when they are released by a Child Care Staff Member (CCSM). My child may walk from the program to the parent pick up area without the direct supervision of child care staff.

The child care staff may monitor the child, communicating their whereabouts via walkie talkies or cell phones with other staff members, but direct supervision will not be provided once the child is released to walk to the parent pick up area.

## PARENT/LEGAL GUARDIAN

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_