Chico Area Recreation and Park District

CARD After School Program

Walk/Ride Home Release Form

My child, _____, has my permission to walk
(child's first & last name)

or ride home at _____p.m. on _____.
(specify date or day/s of the week)

****Please note: As the time change occurs, you will be asked to sign an updated form.**

Parent/Guardian Printed Name_____

Parent/Guardian Signature_____Date_____

Please turn this form in to after school program staff.

545 Vallombrosa Avenue
Chico, CA 95926
office: 530 **895.4711**
fax: 530 **895.4721**

www.chicorec.com

Have you PLAYed Today?