

Kansas Department of Health and Environment

Bureau of Family Health
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Topeka, KS 66612-1274
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Website: www.kdheks.gov/kidsnet

Child Care Licensing Program



FORM D

PARENTAL PERMISSION FORM FOR OFF -PREMISES TRIPS

Name of the Facility (exactly as stated on the license) Lenexa United Methodist Church Preschool/CDO			License # 0000373-015		
Street Address of the Facility 9138 Caenen Lake Rd.		City Lenexa	Zip Code 66215	County Johnson	

_____ may go to the following locations off the premises **with** adult supervision:
First and Last Name of Child or Youth

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

Place Basement of Preschool Bldg.	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place 2 nd Floor of Preschool Bldg.	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place Room 121	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

Place Wesley Room in Church Building	Street Address	City	By Vehicle	Walk/Bike
Signature of Parent or Guardian			Date Signed	

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