



King of Kings Lutheran School
Permission to Leave Campus Form ~ 2019-2020

Student's Name _____

Grade _____ Date of Birth _____

My child has permission to leave the school campus with the following people:

1. Name _____

Relationship to Student _____ Phone # _____

2. Name _____

Relationship to Student _____ Phone # _____

3. Name _____

Relationship to Student _____ Phone # _____

My child does not have permission to leave the school campus with the following people:

1. Name _____

Relationship to Student _____ Phone # _____

2. Name _____

Relationship to Student _____ Phone # _____

3. Name _____

Relationship to Student _____ Phone # _____

My child has permission to walk/bike home after school:

Only with prior notice given to the school office on that particular day _____

Every day without prior notice given to school office _____

My child has permission to ride to and from school athletic events (team members only):

Yes _____ No _____

Parent/Guardian Signature _____ Date _____