

**The following individuals are authorized to sign my child out of the Troy Rec Before and After School Program. I understand that my child will not be released to any individuals except his or her parents who are not named on this list. Program staff has the right to request identification from those persons who are not known.**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature

Date

**I hereby give my permission for program staff of the Troy Rec to release my child when I call on the telephone. I understand that program staff will not be responsible for my child once the child leaves the group area. I also authorize those listed above to telephone the center to release my child. \_\_\_yes \_\_\_no (Valid for one year)**

Signature

Date

**I hereby give my permission for program staff of the Troy Rec to take my child away from the program site for short walking trips within a three block radius of the Troy Rec. The public park which is located on Water St. behind the Troy Miami County Public Library will be a regular destination. I understand that the time of departure, destination, and return time will be posted on the door of the group area. Further, I understand that my child will not be taken on any trips requiring transportation or exceeding the three block radius without my express written permission prior to each trip. (Valid for one year)**

Signature

Date

**My child, \_\_\_\_\_, may be included in pictures posted on the Troy Rec Facebook page or troyrec.com web site. I understand that my child's name will not be used and I will not tag any pictures with children's names other than my own child.  
\_\_\_yes \_\_\_no**

Signature

Date