



Youth Travel Form

This form must be entirely complete before your child attends camp/class.

STUDENT NAME: _____

Entering Grade: _____ Age: _____

School Attending for 2020-2021 Year : _____

****After School programming starts at 3:15 and pick up is between 5:00 and 5:15. ****

Please Check how your student will **get to** our programming:

- By START bus
- Parent Drop Off
- Multiple Parent Drop off
- Walking To Program/Parent Pick up
- Walking to Program/Walking Home
- Activity bus (if available)
- Other: _____

Please Check how your your student will **get home** from our programming:

- By START bus
- Parent Drop Off
- Multiple Parent Drop off
- Walking To Program/Parent Pick up
- Walking to Program/Walking Home
- Activity bus (if available)
- Other: _____

Name/phone of adult(s) permitted to pick up this child from camp/class:

I agree to the stated above that my child plans to use for transportation to and from the Art Association and maintain that the Art Association is not responsible for liability for anytime my child is on site for programming.

Parent's Printed Name: _____

Parent Signature: _____

Date: _____