



ALTERNATIVE TRANSPORTATION PLAN 11.05(9)(b)
(Including Designated Adult)

My child will depart from **Hayden After School** by:

- _____ Parent Pick Up
- _____ Supervised Walk (with whom: _____)
- _____ Other (describe: _____)

I give my permission for my child to be released from the program at the end of the day as stated above and/or I give permission to the following people to receive my child at the end of the day. If no one is authorized, please indicate below by writing "NO ONE".

1. Name _____ Relationship _____
Address _____ Telephone No. _____
2. Name _____ Relationship _____
Address _____ Telephone No. _____
3. Name _____ Relationship _____
Address _____ Telephone No. _____
4. Name _____ Relationship _____
Address _____ Telephone No. _____

Any other transportation requests must be stated in writing and maintained in the child's file or the above plan must be implemented. This permission is valid for one program year from the date of signature.

PARENT SIGNATURE _____ **DATE** _____