

OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION

# Family Child Care Travel and Activity Authorization

**\*IMPORTANT:** If you are not able to complete this form online, click [Print Blank Form](#) to print the form and complete it by hand.

[Print Blank Form](#)

## Permissions

Yes	No	I give permission for my/our child(ren) to leave the family child care home for travel in a car or on public transportation for any reason. I understand that the provider will always use proper safety restraints and will never leave any child unattended in a vehicle.
Yes	No	I give permission for my/our child(ren) to walk to and/or participate in activities geared for my child, but away from the child care home under the supervision of a provider or adult caregiver. My provider will inform me in advance of field trips beyond the immediate neighborhood. (park, library, local pool)
Yes	No	I give permission for my school age child(ren) to participate in (list activity below) outside the residence. I understand my child will not be under the supervision of the child care provider, substitute, or helper.

## Signatures

### Parent Signature

By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. I attest and certify that the information provided above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

I agree	PARENT ELECTRONIC SIGNATURE (type name)	DATE
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### Provider Signature

By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. I attest and certify that the information provided above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

I agree	PROVIDER ELECTRONIC SIGNATURE (type name)	DATE
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