

<b>Child's Name:</b>	<b>2015 – 2016 Classroom Teacher:</b>
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**General Transportation/Walking Permission**

I give Westhampton Day School Staff Members permission to transport my child. I give my child permission to attend scheduled field trips, including walking to Westhampton Field (Maple Avenue & Patterson Avenue).

**Emergency Situation Permission**

Should it be necessary to leave school grounds/evacuate for an emergency situation, WDS has permission to transport my child (according to emergency procedure policies) to either location:

- St. Mary's Hospital - Cafeteria (5801 Bremo Road Richmond, VA 23226)
- St. Christopher's Lower School (711 St. Christopher's Road Richmond, VA 23226)

I understand that WDS will contact me as soon as possible if this were to take place.

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

**Emergency Contacts:**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Phone Number**