

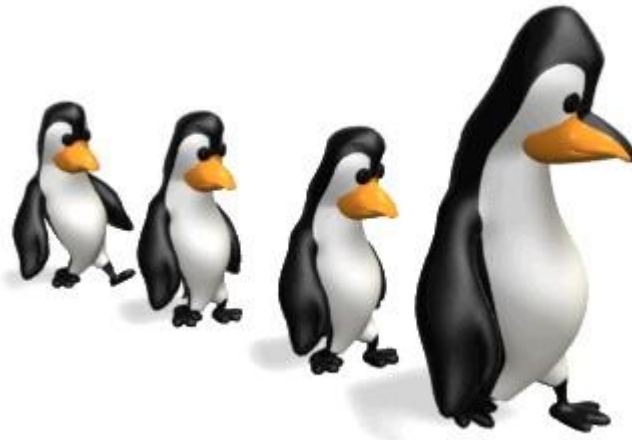


ST. PAUL LUTHERAN SCHOOL
*Equipping Children for **LIFE***

*508 S. Williams Street
Royal Oak, MI 48067*

Mission Statement: "Equip, Support, Serve, Witness Where God Calls Us"

WALKING PERMISSION SLIP



Student Name: _____ has my permission to participate in all activities within walking distance of school. He/she may walk with his/her teacher at those times when it is necessary to leave the school grounds to go to the park, etc.

I understand that all reasonable precautions will be taken by St. Paul Lutheran School, staff, and employees to avoid any injury to my child. In consideration thereof, I waive any claims for damage and/or injuries that may arise from or may be incident to the activities described above to the extent allowed by law.

I further understand that St. Paul Lutheran School and its staff and employees may not be held responsible for the intentional or negligent acts from other persons who are not its employees.

Parent's Signature

Date

