**Saint John Paul II Parish**

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 reledstjp2@gmail.com

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**Walk Home Authorization**

I understand that **“A Walker”** means that my daughter/son will be released at the conclusion of class and will be free to leave the church property, unsupervised by any staff member.

I understand that any decision to change “**A Walker**” permission must be communicated in writing.

Please place an (X) by your choice and sign where indicated.

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Name of Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Catechist Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_

\_\_\_\_I give permission for my daughter/son to be “A Walker.”

\_\_\_\_I DO NOT give permission for my daughter/son to be “A Walker.” He or She must remain in front of the church/school until a designated adult arrives.

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Parents/Guardians signatures

**NOTES:**