



Walking Permission Slip

I give my child _____, age: _____
permission to walk without adult supervision to and/or from the St.
Augustine School events/activities including sporting events or practices
that are in the evening hours.

I assume the responsibility to insure that my child knows and will follow
traffic safety rules. I hereby release the Diocese of Providence, the
Parish/School of St. Augustine and any and all of their representatives or
agents from any and all claims or liability arising from, or related to, my
child's travel to and/or from the school. This permission is valid for one
year from the signing date.

Student _____ Grade _____

Student _____ Grade _____

Student _____ Grade _____

Parent Signature _____

Date _____