

Permission to Attend a Contracted Class

Facility Name: PJA/ECLC Phone: 503-452-3426

Facility Address: 6651 SW Capitol Hwy. Portland, OR 97219

 Child's Name Teacher

Contracted Class:

	Monday	Tuesday	Wednesday	Thursday	Friday
Class Title					
Location					
Start time					
End time					
Start and end dates					

Please fill out the information below to let us know about your child's extra curricular activities. We will escort you r child to and from these classes based **SOLELY** on this written information. **Each session a new form needs to be filled out.**

I understand that this class is offered by another agency or organization and that the certificate from the Child Care Division for operation of a childcare center does not apply. Therefore, the standards from the Rules for the Certification of Childcare Centers may not apply.

Specifically:

- Teachers may not meet minimum state childcare standards.
- Teacher to child ration may not meet state childcare standards.
- Teacher may not have completed a Child Care Division criminal record check.

I give my permission for my child (ren) to attend the class (es) offered at Portland JewishAcademy/Mittleman Jewish Community Center.

 Parent Signature

 Date