Dream Chasers Academy 7415 Destin Dr Tampa Fl. 33619 Dream Chasers Academy of Excellence 14322 N Blvd Tampa Fl. 33613

Transportation/ Provider Sign in/out CONSENT FORM

I give consent for my child to be signed in and/or out of Dream Chaser Academy by Owner, Director, or Staff member.	
Parent Signature	 Date
Director/Owner Signature	Date

This form is used only for permission to sign your child in and/or from our Child Care Facility. The purpose for this form is allowing the Owner/Director/Staff to sign your child out and/or in from our facility; when we transport them to the facility in the morning, pick them up from school in the afternoon, and back home in the evening.

Child's Full Name