

**Parental Authorization to Leave SJA Campus 2010 - 2011**

(Several St. James Academy children live within a few blocks of our campus. Return this form ONLY if you are allowing your child permission to walk home.)

This authorizes St. James Academy to allow my child (ren), \_\_\_\_\_

\_\_\_\_\_ (include **all** names of children receiving permission) to leave campus unaccompanied by an adult at the end of the school day.

I understand that it is **NOT the academy's responsibility to ascertain** what my child(ren)'s destination is or what other students are accompanying my child(ren). By giving permission for my child(ren) to leave campus, I relieve St. James Academy of any and all liability.

Signed: \_\_\_\_\_

Contact number: \_\_\_\_\_