



Open House Nursery School
318A Warren Street
Brooklyn, NY 11201
718-625-5252

PERMISSION SLIPS

Child's Name: _____

Part of the Open House program is walking trips within Brooklyn Heights, Downtown Brooklyn and Cobble Hill, as well as chartered bus trips (for older children) within New York City, New Jersey, and Nassau and Suffolk Counties.

I (we) give permission for my (our) child to participate in these trips.

1st Parent Signature: _____ Date: _____

2nd Parent Signature: _____ Date: _____

Open House participates in student teacher and intern programs. On occasion participants in these programs are assigned to observe and record Open House students. Names will remain confidential.

I (we) give permission for my (our) child to participate in educational studies.

1st Parent Signature: _____ Date: _____

2nd Parent Signature: _____ Date: _____