



ST MICHAEL'S CE JUNIOR SCHOOL PERMISSION TO WALK HOME ALONE (Year 5/6 only)

CHILD'S NAME	
CLASS	
<p>I give permission for my child to walk home alone from St Michael's CE Junior School for the duration of their time here.</p> <p>I understand that it is my responsibility to inform the school immediately if this arrangement changes.</p>	
SIGNATURE	
DATE	