



**Montessori Children's Center**

2745 Centreville Road  
Herndon, VA 20171  
703-793-1890

**Permission Slip**

Student's Name \_\_\_\_\_

Date \_\_\_\_\_

I give MCC full permission to transport my child on field trips scheduled and chaperoned by the school.

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_

\*Parents, please be sure to fill out the Emergency Contact Form. For your child's safety, we carry this very important information with us whenever we leave the MCC premises.