



CONSENT FORM FOR NEIGHBORHOOD WALKING TRIPS

2015-2016 School Year

Name of Student: \_\_\_\_\_

Class: \_\_\_\_\_

This consent form grants permission for the above-named student to participate in neighborhood walking trips not requiring transportation. This form shall remain in effect for the remainder of the school year unless revoked by the parent/guardian or school administration.

Students will be accompanied by Department of Education teachers and Q2L staff at all times.

I am aware that all rules of Q2L student conduct must be adhered to, and will be enforced.

Parent Name \_\_\_\_\_

Parent emergency contact no(s):(required) \_\_\_\_\_  
(cell phone preferred)

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**QUEST TO LEARN**  
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*Challenging students to invent their future*