## Parental Agreement for Educational Library Visit

Date:	
To Whom It May Concern,	
child,	(Parent/Guardian Name), hereby give my consent for my (Child's Name), to participate in the educational visit to (Date of Visit).
understand that transportation w	resources and learning opportunities for the children. I ill be provided by t the visit will include supervised activities.
	uire further information, please feel free to contact me at (Parent/Guardian Contact Number) or (Email Address).
Thank you for your attention.	
Sincerely,	
(Parent/Guardian Signature)	-