

**PICK UP PERMISSION**

**RUSSIAN EDUCATION CENTRE “ROOTS”**

10195 Keele street  
Vaughan, ON L6A 3Y9

I, \_\_\_\_\_,

give permission to **Roots Education Centre**  
for my child transportation during field trips.

Child's name \_\_\_\_\_.

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(PRINT NAME AND SIGN)

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