

Camper Release Form



It is our greatest desire to care for the safety of your child. Therefore, we are concerned that your child is released, at the end of his/her day at camp, into the care of a parent/guardian or someone you wish to designate.

INSTRUCTIONS:

- A. Complete section 1 with your camper's name and the name and dates of the camp attending.
- B. Next, please identify individuals authorized to pick up your camper along with your signature, date and phone number.
- C. IMPORTANT – DO NOT fill out section 2. It is to be completed the days of pick-up.
- D. Both parents are able to pick up child unless noted on this form.
- E. Return this form along with the Medical Form and Liability Form.

SECTION 1

To be completed by a Parent or Guardian

CAMPER NAME: _____

CAMP NAME: _____

CAMP WEEK: _____ DATES: _____

I authorize these individuals to pick up the camper listed above:

1. _____

2. _____

Please do not release my child to: _____

Signature: _____ Date: _____ Phone: _____
(parent or guardian)

SECTION 2

This section will be completed daily at pick up.

Signature of person picking-up camper:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

If the person signing above is not authorized to pick up camper, we will contact the parent/guardian for permission prior to the camper being released into the custody. Identification will be required.