



PICK UP PERMISSION FORM

FILL OUT THIS FORM, BRING IT TO THE CHECK-IN TABLE WHEN ARRIVING AT CAMP.

Camper's Full Name: _____

Program: _____

NAMES OF PERSONS WHO MAY PICK UP THE CAMPER:

I hereby give permission for my camper to leave camp with the person(s) named below.
Please note: It is in the responsibility of the parents/guardians to notify the camp via email and phone of any changes.

PERSON #1:

Name: _____

Relationship to the Camper: _____

Phone Numbers:

Cell: _____

Home: _____

PERSON #2:

Name: _____

Relationship to the Camper: _____

Phone Numbers:

Cell: _____

Home: _____

PERSON #3:

Name: _____

Relationship to the Camper: _____

Phone Numbers:

Cell: _____

Home: _____

NAMES OF PERSONS WHO MAY NOT PICK UP THE CAMPER:

Name: _____

Relationship to the Camper: _____

Name: _____

Relationship to the Camper: _____

If there is a separation or a divorce custody concern in which we should be aware, please explain:

EARLY CHECK OUT REQUEST:

Day of the Week: _____ Date: _____ Time: _____

**The Camp Team will contact you soon so you'll be able to get into camp on this date and time to pick up your camper.*

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date

ON PICK UP DAY [TO BE FILLED OUT AT CAMP DURING CHECK OUT]:

Adult's Printed Name

Adult's Signature

Date

Yes No Driver's License or ID checked to verify name

Signature of Camp Staff: