



PICK-UP/DROP-OFF AUTHORIZATION FORM

Camper's Name _____

Parent Name _____ Parent Name _____

Mobile Phone Number _____ Mobile Phone Number _____

Work Phone Number _____ Work Phone Number _____

PERMISSION TO ALLOW CHILD TO ENTER HOUSE WITHOUT A PARENT PRESENT

I _____ give _____ permission to enter the house without an adult present.

Parent's Signature

Date

←-----→

Day Camp

In the event that I do not pick up my child the following people listed below have my authorization to pick up my child. Please include child's other parent, relatives, sitters, friends etc. For each name listed, please include phone number, address and relationship to the child. Identification will be required in order for the child to be released to any individual.

Name _____ Phone _____ Relationship _____

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Children will not be released to anyone not on this list. I understand that it is my responsibility to update this form whenever necessary.

Signature _____ Date _____ Relationship to child _____