

AUTHORIZATION PICK UP FORM



Please take a few minutes to fill out this form and bring it with you to check-in **Monday morning!** If you forget, we will have copies available for you, but check-in will go quicker if you already have it filled out.

CAMPER NAME: _____
In case of an emergency, please provide us with as many numbers as possible:

Name: _____ Relation: _____ Phone: _____
Name: _____ Relation: _____ Phone: _____
Name: _____ Relation: _____ Phone: _____

AUTHORIZED CAMPER CHECK-OUT

We want to make sure that your camper has an incredible week at camp! Part of this process is making sure that our check-in and check-out process are as safe as possible. We want to be sure that your camper is going home with only those whom you have authorized.

**EVERYONE MUST SHOW A VALID ID TO PICK UP A CAMPER!
YOUR CHILD WILL NOT BE RELEASED WITHOUT VALID ID!**

Please list anyone who is authorized to pick up your child INCLUDING yourself. Please provide their relationship to the child and their name. Include any relatives, friends, carpools, etc.

YOU _____ Number _____
Name _____ Relationship _____ Number _____
Name _____ Relationship _____ Number _____
Name _____ Relationship _____ Number _____
Name _____ Relationship _____ Number _____