

**PLEASE COMPLETE AND HAND IN AT ORIENTATION
OR ON THE FIRST DAY OF CAMP**

Dear Parents/Guardians:

In the event that you are unable to pick up your child at camp we ask you to provide us with names, address and phone numbers of the adults ***that you trust and that your child knows.***

Other than the Parents/ Guardians or Carpool Parent, these will be the only adults allowed to pick up your child. **A note must be sent to camp with the person's name and day that they will be picking up your child. *Photo Identification must be shown.***

EMERGENCY NAMES

1. NAME _____
ADDRESS _____
PHONE _____

2. NAME _____
ADDRESS _____
PHONE _____

3. NAME _____
ADDRESS _____
PHONE _____

Child's name: (please print) _____

Parent's Signature: _____ Date: _____