



## 2011 Camper Pickup Permission

Return form by: May 1st

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

**Purchase Day Camp will release your child to either parent unless specific arrangements have been made with the Camp Director. In an effort to streamline dismissal, you may use this form to authorize up to two (2) other people to pick up your child. You MUST write a note on any day that someone not listed on this form is picking up. Each individual should be able to provide identification if picking up. Please be sure to sign the bottom of each page.**

Name: _____	Home Phone #: _____
Address: _____	Cell Phone #: _____
City: _____ State: _____ Zip: _____	Office Phone #: _____

Name: _____	Home Phone #: _____
Address: _____	Cell Phone #: _____
City: _____ State: _____ Zip: _____	Office Phone #: _____

**Sign Here** Signed \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only:



## 2011 Emergency Contact Information

Return form by: May 1st

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Age Group: \_\_\_\_\_

**We require you to provide three (3) Emergency Contacts in case your child needs to be picked up from camp due to illness or injury. Please do not include parents since we will try all parent contact numbers first. These individuals should work or reside in the area and would generally be available during the camp season. Grandma who lives in Texas is not a good choice for an Emergency Contact. Each individual should be able to provide identification if picking up. Please be sure to sign the bottom of each page.**

Name: _____	Home Phone #: _____
Address: _____	Cell Phone #: _____
City: _____ State: _____ Zip: _____	Office Phone #: _____
Email Address: _____	

Name: _____	Home Phone #: _____
Address: _____	Cell Phone #: _____
City: _____ State: _____ Zip: _____	Office Phone #: _____
Email Address: _____	

Name: _____	Home Phone #: _____
Address: _____	Cell Phone #: _____
City: _____ State: _____ Zip: _____	Office Phone #: _____
Email Address: _____	

**Sign Here** Signed \_\_\_\_\_ Date \_\_\_\_\_