



PICK-UP AND DROP OFF FORM 2019

The following person will normally drop off and pick up my child:

Name: _____

Telephone: _____ Cell Phone: _____

Signature: _____

This person will drop off my child at camp at _____ AM/PM

and pick up my child at Camp at _____ AM/PM.

In case of an emergency, or if the designated person cannot be contact to pick up my child, I hereby authorize the following persons(s) to pick up my child:

Name: _____

Phone: _____ Cell Phone: _____

Signature: _____

Name: _____

Phone: _____ Cell Phone: _____

Signature: _____

Parent/Guardian Signature: _____ Date: _____

Camper's Signature: _____ Date: _____