

**\*\*\*Camper Release Form\*\*\***

Your child's safety is important to us! Please give us the name of the individual who will be picking up your child on departure day. Fill out the information requested below and bring it to camp with you. If it becomes necessary to change this information, please call the camp as early as possible before Friday at noon! (585) 322-9975

Fill out prior to arrival:

My child, \_\_\_\_\_ will be picked up  
(name)

from camp on \_\_\_\_\_ by \_\_\_\_\_  
(date) (individual's name)

This individual is: (check one)

\_\_\_\_\_ the child's parent or guardian

\_\_\_\_\_ a relative or friend (please specify: \_\_\_\_\_)

\_\_\_\_\_ church vehicle driver

\_\_\_\_\_/\_\_\_\_\_  
signature of parent or guardian date

\_\_\_\_\_/\_\_\_\_\_  
signature of individual who will pick child up date

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**to be filled out on departure day:**

Camper released to:

\_\_\_\_\_/\_\_\_\_\_  
signature of person taking camper from camp date

**for office use:**

Counselor: \_\_\_\_\_

Director: \_\_\_\_\_

**Call received to change information:**

Rec'd by: \_\_\_\_\_

Caller's Name: \_\_\_\_\_

Date/time/details: \_\_\_\_\_

Who will pick up the camper: \_\_\_\_\_