

Sign Out Authorisation (To be completed by parent / guardian)

| Camper's Name(s) | Camp: | |
|------------------|-----------|--|
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I, ______ (printed parent / guardian name), give permission for my child / children to be released from camp to the following authorised adults:

| Name of Adult | Relationship | Phone Number |
|---------------|--------------|--------------|
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Parent / Guardian Signature: _____ Date:_

Emergency Contact Information

In the event of an emergency, the parent / guardian(s) listed on the Registration form will be notified first. Please list additional emergency contacts below in case we cannot reach you.

| Name | Relationship to Child | Primary Phone Number | Alternative Phone Number |
|------|-----------------------|----------------------|--------------------------|
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