

Camper Pick-up/ Release Form

This form must be completed by the parent/guardian and sent to the Camp Office PRIOR to your arrival to camp: 79 Norwesca Rd Chadron NE 69337.

Camper Name: _____

Camp Name: _____ Dates of Camp: _____

1) <u>Please Check only one box below.</u>

2) Pick a Family Code Word that all pickup persons will know CODE WORD

Camper can <u>only</u> be picked-up by a parent or guardian. Signature(s) must appear below at asterisks. ** If an emergency situation arises you must provide a written letter, email, or personal phone contact with our office authorizing us to release camper to another adult. This includes other parents, relatives, or friends of the family.

Camper can be picked-up by any of the persons listed below or a parent or guardian. All persons must be listed at the time of check in. Any changes to this form or in the persons coming to pick-up camper must be prearranged with our office <u>prior</u> to camper's departure from camp.

Name	Address	Telephone	Relationship
Name	Address	Telephone	Relationship
Name	Address	Telephone	Relationship
**			
Parent/Guardian Sig	nature		Date
**			
Parent/Guardian Signature			Date
	Re	lease Information	
Signature of perso	n picking up camper:		Date: