

# Camper Release Form

(one per child)

The person(s) listed below are authorized to pick up my child from the Warren Willis United Methodist Summer Camp.

Parent/guardian signature \_\_\_\_\_

Date \_\_\_\_\_

Camper Name: \_\_\_\_\_

Week of Camp: \_\_\_\_\_

Age Level (elementary, middle, or high school): \_\_\_\_\_

**THIS CAMPER WILL BE PICKED UP BY:**

1. Name (please print) \_\_\_\_\_

Relationship \_\_\_\_\_

2. Name (please print) \_\_\_\_\_

Relationship \_\_\_\_\_

**SIGNATURE OF ABOVE PERSON(S)**

1. \_\_\_\_\_

2. \_\_\_\_\_

Check here if the above person(s) is a church representative.

-----Do not sign below until camp check out time-----

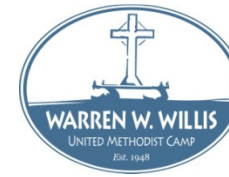
**Sign Out Section: End of Camp Program**

Authorized Release Signature: (Must be the same as signature above.) If any change, please bring a note for camper's parent/guardian, WITH THEIR SIGNATURE, telling us who is allowed to pick them up. Thank you.

Signature to match one of the above:

\_\_\_\_\_

Date



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