

YMCA CAMP GREENVILLE

Pick-up Authorization Form
100TH SUMMER-2012 "I'M THERE"

Mail this completed form by **5/11/12** to:
YMCA Camper Services
P.O. Box 9039
Greenville, SC 29604

Camper Name: _____
(First) (Last)

This form identifies people who are authorized to pick-up your child from camp. Additionally, people listed on this form are understood to be contacts for Camp Greenville to use while your child is in our care and can be asked to pick-up your child (due to illness, behavior, or at the end of session) as needed. The person picking up your child will be asked to sign this form upon pick-up of the child from camp. Only an authorized adult listed on this form may pick up your child from camp. **(Please read and sign where indicated by the arrow).**

Be sure to list all authorized adults – including you (listed first)

Please be mindful of when your camper's session ends and have an adult listed below scheduled for pick-up.

<u>Contact Name</u>	<u>Relationship to Camper</u>	<u>Primary Phone #</u>	<u>Alternate Phone #</u>

Permission to Provide Necessary Transportation and Pick-up Authorization:

Please sign below to signify your understanding of the camp's pick-up policy and to authorize camp to transport your child for special or necessary trips out of camp:

I authorize the adults listed above to pick-up my child from camp as necessary should he or she need to leave camp due to illness, injury, or behavior, or at the end of the session. I have informed them that they are listed here and may be contacted by camp.

I authorize camp to provide or arrange any necessary program-related transportation for my child (e.g. specialty program day-trip, emergency transportation, etc.)

I understand camp will only release my child to an adult listed on this form regardless of their relationship to my child or their being named on another camp form.

Parent/Guardian signature _____ Date _____

Pick-up Person Verification

FOR OFFICE USE ONLY

Printed Name _____ Signature _____

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I have verified the authorization of the person picking up this camper

Counselor Initials _____ Date _____