

CAMPER EARLY RELEASE FORM

Camper:

Name: _____ Unit # _____

Address: _____ City: _____ Zip: _____

Unit Leader:

Name: _____ Phone # _____

Address: _____ City: _____ Zip: _____

Unit Leader Approval for Release:

Signature: _____ Date: _____ Time: _____ AM / PM

Person to Whom Camper is Released:

Name: _____ Phone # _____

Address: _____ City: _____ Zip: _____

Date of Release: _____ Time of Release: _____ AM / PM

Proof of Identity of Said Person:

Reason for Release:

Camp Representative Comments:

Camp Representative:

Name: _____ Camp Position _____

Signature: _____ Date: _____ Time: _____ AM / PM