2011 ELBOW LANE DAY CAMP CHILD RELEASE AUTHORIZATION

Camper(s) last name: _____

First name(s): _____ _____ _____

I hereby give permission for the following person(s) to pick up my child(ren) from camp:

	Name:	**Relationship:**
(1)	_____	_____
(2)	_____	_____
(3)	_____	_____
(4)	_____	_____

NOTE: This Release must be signed by the custodial parent and/or legal guardian of each Camper*. Elbow Lane Day Camp WILL NOT permit any camper to leave the camp grounds at any time with anyone other than those persons authorized by the camper's parents and listed above. CAMP STAFF WILL ASK FOR IDENTIFICATION!

_____ _____

Signature of Custodial Parent/Legal Guardian Date

**Both parents are assumed to be approved for pick up. Please contact Bob directly if there are any custodial parent issues of which we should be aware.*