2020 ADVENTURE CAMPS – BOATHOUSE DISTRICT

In order to have your child checked in or out by someone other than the custodial parent or guardian, the parent/guardian must sign an authorization form to authorize others to check children in and/or out.

Parent/Guardian Name: ________________________________ Date: ______________

Child’s Name: ______________________________________________________________

Child’s Name: ______________________________________________________________

Child’s Name: ______________________________________________________________

Name of Authorized Persons  |  Relationship to Child(ren)
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Family “Secret Password” (used instead of photo identification): __________________________

I authorize the following individuals to check my child(ren) in and/or out at any time.

____________________________________________________________________________

Parent/Guardian Signature