



Alternative Pick-Up / Car Pool Permission

Campers will only be released to parents or to an individual who is designated in writing by the parents. These written notes (by parents) and all car pool arrangements (in writing) will be kept by the Health Care Supervisor for easy access and verification.

HOOPTOWN STAFF RESERVES THE RIGHT TO REQUEST PHOTO IDENTIFICATION.

Camper: _____

Age: _____

ALTERNATE PICK- UP PERSON: _____

Phone Number: _____

ALTERNATE PICK- UP PERSON: _____

Phone Number: _____

Notes: _____

Thank you for your cooperation.

Please sign and date this form.

Signature of Parent/ Guardian _____

Date _____