



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA Storer Camps EcoCorps Release Form

Participant Name:

Participant Pick-Up Consent

We will not release your child to anyone other than specific individuals you identify below. Please indicate below the individuals to whom your son or daughter may be released, including yourself. These individuals will be asked to show identification when picking up your child.

Name: _____ Home Phone: _____

Relationship To Camper: _____ Cell Phone: _____

Name: _____ Home Phone: _____

Relationship To Camper: _____ Cell Phone: _____

Name: _____ Home Phone: _____

Relationship To Camper: _____ Cell Phone: _____

If at a later date you would like to add or remove people from this list please notify our office in writing.

TRANSPORTATION PERMISSION

My child (please Print) _____ has permission to be transported in a YMCA vehicle, driven by a YMCA employee, during the designated stay at YMCA STORER CAMPS for purposes associated with the Specialty Program and Group Retreat Program. I absolve YMCA STORER CAMPS and the YMCA of GREATER TOLEDO and all its employees of any and all liability arising from this transportation agreement.

Parent/Guardian Signature: _____ Date: __/__/__

September 14-16, 2018 _____
Authorized Individual Date/Time of Check Out

October 12-14, 2018 _____
Authorized Individual Date/Time of Check Out

November 16-18, 2018 _____
Authorized Individual Date/Time of Check Out