YMCA Storer Camps Release Consent Form



Michigan Youth Camp Safety Laws require licensed camps to get authorization from parent/guardians for the release of their child to specific individuals. Please indicate below the individuals to whom your son or daughter may be released.

Persons authorized to pick up your child must be listed below with name and contact information *regardless* of their relationship to the child. For example, if you, the parent will be picking up your child, please list your name immediately below. Also, list additional relatives, friends, etc... who might be picking up your child in your absence.

Name of Camper:		
Program Name:		Session Number:
1. Person Authorized to Pick-U	p Your Child	
Relationship to Camper:	(Cell Phone:
Home Phone:	Work Phone:	
2. Person Authorized to Pick-U	p Your Child:	
Relationship to Camper:	(Cell Phone:
Home Phone:	Work Phone:	
3. Person Authorized to Pick-U	p Your Child:	
Relationship to Camper:	(Cell Phone:
Home Phone:	Work Phone	
You may make changes to this for parents/guardians and submitted		changes must be made in writing by the
If parent(s) or quardian(s) are N	IOT listed above, please complete the	information below:
Name		Mother 🗖 Father 🗖 Guardian
Phone: Cell:	Home:	Work:
Name		Mother 🗖 Father 🗖 Guardian
Phone: Cell:	Home:	Work:
Signa	ture Required Below at Time of Check	a Out
	/ /	
Sianature of Person Pickina Up		Time of Check Out