

TAMARAK DAY CAMP 2017 VISITOR PERMISSION FORM



Camper(s) names: _____

Mom's name _____ Dad's name _____

Home (____) _____

Mom's cell (____) _____ Dad's cell (____) _____

Mom's work (____) _____ Dad's work (____) _____

Please indicate which number to call **first** if needed.

Home Mom's Cell Mom's Work Dad's Cell Dad's Work

In order to visit your camper at Tamarak

1. Visitors must be listed on this form
2. Visitors must bring a state issued picture ID to camp
3. IDs will be checked and collected upon signing in to camp

In addition to the parents listed above, the following have my permission to visit my child(ren) at camp

First and last name

Relationship to camper

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

As an additional precaution, is anyone specifically prohibited from visiting?

YES **NO** If yes, indicate below

First and last name

Relationship to camper

- | | |
|----------|-------|
| 1. _____ | _____ |
|----------|-------|

Parent signature: _____ Date: _____