



Camp Soles Camper Pick-Up Authorization

Camper Name: _____

Siblings or Additional Camper Names:

Please list those authorized to pick up the camper(s) listed above from Camp Soles
**** (Photo ID is required to check out a camper) ****

Primary Authorized Pick-up Person

Print name

Relationship: _____

Phone: _____

Alternative Authorized Pick-up Individuals

<p>_____</p> <p>Print name</p> <p>Relationship: _____</p> <p>Phone: _____</p>	<p>_____</p> <p>Print name</p> <p>Relationship: _____</p> <p>Phone: _____</p>
<p>_____</p> <p>Print name</p> <p>Relationship: _____</p> <p>Phone: _____</p>	<p>_____</p> <p>Print name</p> <p>Relationship: _____</p> <p>Phone: _____</p>

Signature of Parent/Guardian or Person Completing this form

Date