

# Camper Release Form

**Bring with  
you to camp**

Dear Parent,

Your child's safety is of great concern to us. Therefore, IF SOMEONE OTHER THAN YOU will be picking up your child on the day of departure, please fill out the form below with the information requested. **Proof of identification will be required before a camper will be released.**

If, during the camp week, it should become necessary for someone else to pick up your child, please contact camp before the end of the week.

**Phone: (909) 866-9366      Email: [info@cedarbrookcampca.org](mailto:info@cedarbrookcampca.org)**

My child, \_\_\_\_\_, will be picked up from camp on \_\_\_\_\_, \_\_\_\_\_  
Name Day Date

By:

Authorized Individual \_\_\_\_\_  
Name

**OR:**

Church Vehicle \_\_\_\_\_  
Name of Church

\_\_\_\_\_  
Parent/Guardian Signature      / /  
Date

\_\_\_\_\_  
Signature of authorized person on pick-up      / /  
Date

**SPECIAL INSTRUCTIONS:** Is there anyone to whom you **DO NOT** want your child released? NO \_\_\_\_ YES \_\_\_\_

If yes, please list name(s):

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Name Relationship

**For Office Use Only:**  
Call received to change instructions:  
Caller \_\_\_\_\_  
Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_:\_\_\_\_ am/pm  
Received by \_\_\_\_\_