Parent Contact Information

Campers Name:	
Parent Name:	(first contact)
Phone #:	(emergencies only)
E-mail address 1:	
Parent Name:	(second contact)
Phone #:	(emergencies only)
E-mail address 1:	
Any Specific Information we need to be awa	are of? (i.e. allergies, etc)?
Pick-up Alternates – These people have my	permission to pick up my child:
Name:	
Name:	
Phone:	
Phone:	