



SHILOH ADVENTURE CAMP
Camper Release Form

USE OF FORM: This form identifies the only authorized adults allowed to pick-up a camper from camp. A signed original of this form must be on file at camp upon camper check-in.

Camper _____
Age _____ **Gender** _____ **Week(s) of Camp** _____

| SHILOH USE ONLY | | |
|------------------------|--|--|
| Cabin _____ | | |
| Counselor _____ | | |

Shiloh Adventure Camp is committed to the safety of your camper. Therefore no camper may leave camp at any time without proper authorization. Whenever a camper leaves camp, whether during the week or after closing ceremonies, camp staff will require the signature and identification of a person identified on this form to allow the camper to leave.

PLEASE REMEMBER TO BRING VALID PICTURE ID FOR CAMPER PICK-UP.

Release Authorization

These persons may pick-up my camper from camp. Please print full name of all persons, including parents/guardians, relatives, friends, etc.

1. _____
2. _____
3. _____
4. _____

| SHILOH USE ONLY | | |
|-----------------|-------|-------------|
| Signature | ID # | Date & Time |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

These persons shall not pick up my child under any circumstances.

1. _____
2. _____
3. _____
4. _____

Parent/Guardian (Print) _____

Signature _____ **Date** _____

If you need to change or add authorized person(s), you must provide another revised original Camper Release Form, signed by the same above parent/guardian at least 1 day prior to pick-up.