

Camper Release Form / Consent to Leave Camp

(to be completed by legal parent/guardian of staff members under 18 years of age)

Name: _____

Camp: Cockrell River Camp, Horseshoe Bend, Rough Riders,
 Bovay Scout Ranch, Winter Camp

Camp Staff under the age of 18 are not permitted to leave Camp property at anytime except with a parent/guardian, person(s) listed below or as assigned by the Camp director. Staff who do not follow camp check-out procedures will be dismissed from duty.

Camper Release: I give approval for my son/daughter to leave camp with the following person(s):

Name _____ Relationship _____ Cell _____

Name _____ Relationship _____ Cell _____

Name _____ Relationship _____ Cell _____

Consent to leave camp for an activity: I give approval for my son/daughter to leave camp property for the following situations (consider evenings off, trips in town to shop or get a haircut). "May travel with" instructions could list a specific people, or be generic, such as any staff member over 18 or 21.

Date(s): _____ Time: _____ to: _____

Location: _____ Approximate mileage from camp: _____

Description of activity: _____

May travel with: _____

Office Use Only: Verified: _____ Date: _____	Checked out of Camp: _____	Checked into Camp: _____
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Date(s): _____ Time: _____ to: _____

Location: _____ Approximate mileage from camp: _____

Description of activity: _____

May travel with: _____

Office Use Only: Verified: _____ Date: _____	Checked out of Camp: _____	Checked into Camp: _____
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Date(s): _____ Time: _____ to: _____

Location: _____ Approximate mileage from camp: _____

Description of activity: _____

May travel with: _____

Office Use Only: Verified: _____ Date: _____	Checked out of Camp: _____	Checked into Camp: _____
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Date(s): _____ Time: _____ to: _____

Location: _____ Approximate mileage from camp: _____

Description of activity: _____

May travel with: _____

Office Use Only: Verified: _____ Date: _____	Checked out of Camp: _____	Checked into Camp: _____
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My son/daughter may NOT leave camp with: _____

Parent/Guardian (if minor): _____ Signature: _____ Date: _____

Cell: _____ Phone: _____ Email: _____

Name: _____