

# CAMP CHECK-OUT FORM

PROGRAM DEANS: \_\_\_\_\_ CAMP : \_\_\_\_\_

DATES: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Camper's Name	Name (print) (who will pick up camper)	Relationship (to camper)	Adult's Signature	Departure Time (at pick up)
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____

\_\_\_\_\_  
Signature of Counselor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Cabin/Lodge