

Bring A Friend Day Permission Slip

Date of notice: _____ Date of visit: _____

Reminders for visits

1. Parents must provide transportation to and from camp.
Morning drop off times are between 9:10 and 9:25 am. Pick up times are before 3:30pm or between 4:10 and 4:25pm.
2. The friend must be of the same age and gender as our camper.
3. This permission slip must be returned by July 29th
4. Campers may bring a friend July 30th only. Camper

Name _____ Group _____

Camper's parent signature _____

Guest information

Guest's Name _____ Guest's parent signature _____

Guest's Address _____

Phone number _____ Emergency number _____

My child will be dropped off by _____ Phone _____

My child will be picked up by _____ Phone _____

Permission for Tylenol and Benadryl

If camp is unable to reach me, I give permission to the Nurse to administer the following medication. I realize that generic brands are used and the dose would be based on the child's age.

Yes (Check one) No

Tylenol for fever of 101 degrees or higher _____

Benadryl for allergic reaction _____

*We are unable to administer any other medications to guests.