RELEASE AND PERMISSION FORM

CHILDS' NAME:_____

CHILD WILL BE TRANSPORTED ON THE FOLLOWING DAY (S) AM/ PM /BOTH
MONDAY____ TUESDAY____ WEDNESDAY_____ THURSDAY____ FRIDAY____

FRIDAY IS CLOSING CEREMONY, WILL YOU BE ATTENDING? YES / NO
WILL YOU BE PICKING YOUR CHILD UP AFTER THE CEREMONY? YES / NO

HOME PHONE_____ EMERGENCY PHONE_____

CHILD WILL BE PICKED UP AT AND TAKEN TO THE FOLLOWING ADDRESS:
Eastmont Park & Ride: 2020 El Capitan Way, Everett, WA 98208

PERSONS AUTHORIZED TO PICK UP & DROP OFF MY CHILD ARE: (you will need to have someone to sign your child in & out with the Bus Staff and/or at Camp Killoqua)

_____ _____
Name Phone

_____ _____
Name Phone

_____ _____
Name Phone

DROP OFF TIME IS 8:00 AM. PICK UP TIME IS 5:00 PM.

CAMP FIRE USA WILL NOT BE HELD RESPONSIBLE FOR ACCIDENTS OR INJURIES TO RIDERS UNLESS SUCH ACCIDENT OR INJURY IS A DIRECT RESULT OF NEGLIGENCE ON THE PART OF OPERATORS.

Please sign and return to the Camp Fire USA office *AS SOON AS POSSIBLE*.
Please keep the second page for your records. **Thank you.**

PARENT SIGNATURE:_____

DATE:_____