

Dear Camper:

If you should bring a minor from another family as part of your group, we require that their parent or guardian review the Camper Health form completed for their child and sign this authorization and release form. Thank you for your cooperation. We are looking forward to seeing your child at camp.

CAMPER RELEASE AND MEDICAL CARE AUTHORIZATION FORM

Permission is hereby granted for my child(ren): _____

to attend Camp Sacramento with: ______

from ______ to ______. I have read the Camper Health form(s) for my

child(ren) and confirm that it accurately reflects the health status and program restrictions

for my child. I agree to the following provisions:

PARENT OR GUARDIAN SIGNATURE

PARENT OR GUARDIAN NAME (please print)

In case of illness or accident, please notify:

Name

Address

(____)____ Phone

DATE

NOTE: Camper Health forms must be completed for each child/camper. This form must be brought to camp and submitted to the camp office at time of check-in.