



## Designated Pick Up Form 2018

Please list all the name(s) of all persons authorized to pick up your child. Please complete a form for each child. Name of camper: \_\_\_\_\_ Red, Orange, Green, USA or Future Stars Camp

(Please circle program)

1. Name of authorized person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_  
Relationship: \_\_\_\_\_ Copy of Picture I.D. (Please circle) Driver's License, Passport, State I. D.
2. Name of authorized person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_  
Relationship: \_\_\_\_\_ Copy of Picture I.D. (Please circle) Driver's License, Passport, State I.D.
3. Name of authorized person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_  
Relationship: \_\_\_\_\_ Copy of Picture I.D. (Please circle) Driver's License, Passport, State I.D.

• Please note each individual designated to pick up your child will need to show the identification indicated above each time. A photocopy of the person(s) authorized to pick up your child will remain on file through the duration of camp.

### Waiver of Pick-Up

My child \_\_\_\_\_ has permission to leave the premises of Sportsmen's Tennis and Enrichment Center Summer Camp at dismissal time without adult supervision. I understand that my signature releases Sportsmen's Tennis and Enrichment Center of all responsibility as my child will be dismissed in their own care. My signature and initials indicates that I have read, understand and acknowledge all the terms listed below and initial.

Please note that all campers who have permission to walk home will be required to sign-out each day. \_\_\_

- My child is 12 years or older. \_\_\_
- Our residence is between 1-3 miles in distance from the organization. \_\_\_
- My child understands that he or she should not deviate from the agreed upon route to home between parent and child.
- My child is familiar with the immediate area, as well as the area along the route to home. \_\_\_
- Upon arriving home, my child understands that he or she must call Sportsmen's to indicate their arrival to home 617.288.9092.
- If your child must leave prior to the dismissal of camp, your child must provide a signed note by parent or guardian. \_\_\_
- If your child will be absent, please call prior to 9:30 a.m. on the day of your child's absence. \_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**"This camp must comply with regulations of the Massachusetts Department of Public Health And be licensed by the local board of health."**