

Camper Transportation Authorization Form

I give permission for my child _____

who will be at Camp Hollymont during the 2010 _____ session to

be visited and/or taken from camp by the following persons:

Name(s) _____ Date of Pick Up _____

Relationship to Camper _____ Phone _____

Name(s) _____ Date of Pick Up _____

Relationship to Camper _____ Phone _____

Name(s) _____ Date of Pick Up _____

Relationship to Camper _____ Phone _____

Parents Signature _____

Date _____

Parents Phone _____