

**KIDSPORTS SUMMER CAMP  
PICK-UP CONTACTS**



Counselor's Name: \_\_\_\_\_

**CAMPER'S FULL NAME (PLEASE PRINT):** \_\_\_\_\_

GRADE in Sept. '19: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email address: \_\_\_\_\_

Mother's Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email address: \_\_\_\_\_

Father's Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**IMPORTANT...**

**\*Phone Numbers (between 4 pm – 7 pm):** \_\_\_\_\_

**\*This is the phone number of the parent we could reach in case we have a questions regarding the person picking up the child.**

LIST ALLERGIES: \_\_\_\_\_

I authorize the following person(s) to pick up my child from the Kidsports Front Desk at the end of the day. I UNDERSTAND THAT I SHOULD STILL NOTIFY THE COUNSELOR AND/OR ASSISTANT THAT SOMEONE ELSE IS PICKING MY CHILD UP ON A SPECIFIC DAY.

1. Name of person picking up child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone #: \_\_\_\_\_

2. Name of person picking up child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone #: \_\_\_\_\_

3. Name of person picking up child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone #: \_\_\_\_\_

PARENT'S SIGNATURE: \_\_\_\_\_