

*Village of Montgomery*  
*60 Bachelor Street*  
*Montgomery, NY 12549*

**Permission to release form for Summer Camp Program**

In order for your child to be picked up by family or friends other than parents or guardian, you must complete this form. Write the name, address, phone number and relationship of the person that you will have pick-up your children from Summer Camp. Picture ID must be shown.

**This form will be kept on file by the Camp.**

**PRINT ALL INFORMATION CLEARLY, INCLUDE FIRST & LAST NAMES; PHONE #'s WITH AREA CODE. COMPLETED & HANDED IN AT REGISTRATION.**

Children to be picked up: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Contact # \_\_\_\_\_ Alternate # \_\_\_\_\_

Relationship \_\_\_\_\_

I hereby give permission for the above name person to drop off or pick up my children from camp. It is the parent or guardians responsibility to inform the designated person above of camp drop off/pick up times and any parking rules for camp.

Parent/Guardian Signature: \_\_\_\_\_