

ALTERNATE PICK-UP ARRANGEMENTS
National Gymnastics Training Camp

PARENTAL PERMISSION SLIP

*Complete and submit this form **only if** your child needs to be picked up on departure day or leave camp during visiting day by someone other than the parent/guardian.*

~ No camper is allowed to be picked up at camp with anyone other than the parent/guardian without this completed form. ~

Camper's name _____ Arrival date _____ Departure date _____

Transportation provided by:

1st Adult: _____ Relationship: _____
(Print name)

2nd Adult: _____ Relationship: _____
(Print name)

Parent/Guardian's name: _____
(Print name)

Parent/Guardian approval: _____ Date: _____
(Signature)