

CAMP KIWI

Authorized Child Pick-Up Form

Date: _____

Child's Name _____
(please list all campers above).

Persons Authorized To Pick Up My Child

1) Parents: _____

2) _____

3) _____

4) _____

Persons NOT Authorized to Pick Up My Child

1) _____

2) _____

PARENT SIGNATURE _____

KIWI STAFF ONLY

Child's Name _____

Will be picked up by _____

Today at _____ (Time)

Per Phone Instructions by _____ (Parent's Name)

Kiwi Signature (If Phoned In) _____

I.D. Checked By: _____