



PICK-UP/RELEASE FORM



This form must be completed or your child will not be permitted to attend 4-H Summer Camp.	
I, the parent/guardian/foster parent ofhave read, understand and agree to the following. My child will return from 4-H Camp on Friday, August 2nd at 2:00 p.m. The bus will unload at McCracken County Extension Service.	
It is my responsibility to arrange to pick-up my child/children upon her/his return from camp at the above time. There will be no exception to this policy regardless of relationship to the child. Please inform everyone approved by you on this release that he/she must present a valid driver's license or photo ID before the child will be released. IF A CAMPER'S PARENTS ARE SEPARATED OR DIVORCED, UNLESS THE CAMP IS PROVIDED WITH A COPY OF A KENTUCKY COURT ORDER TO THE CONTRARY, BOTH BIOLOGICAL AND ADOPTIVE PARENTS HAVE ACCESS TO THE CAMPER.	
CAMPER NAME	COUNTY: McCracken
Fathers Name:	Cell Phone:
Home Phone: ()	Work Phone:
Mothers Name:	Cell Phone:
Home Phone: ()	Work Phone:
If applicable, the custodial parent is:	
Home Phone: Cell Phone:	Work Phone:
The camper named above has my permission to be picked up by person(s) listed below. I understand my child cannot be picked up from the campgrounds by anyone except his/her guardians unless they are on this list.	
NAME: RELATIONSH	IP Phone/Cell#
NAME:RELATIONSHI	P: Phone/Cell#
NAME:RELATIONSHI	P:Phone/Cell#
When a camper is not picked up or when no one listed above is present to pick up a camper, the camper will be turned over to local child protection authorities.	
BY SIGNING THIS, I ACKNOWLEDGE THAT I HAVE READ ALL THE ABOVE INFORMATION RELATED TO PICKING UP MY CHILD WHEN HE/SHE RETURNS FROM 4-H CAMP, AND I HAVE INSTRUCTED MY CHILD THAT HE/SHE IS TO LEAVE WITH NO ONE UNLESS LISTED ABOVE. HE/SHE ALSO HAS BEEN TOLD TO REPORT IMMEDIATELY TO THE AGENT IF THE DESIGNATED PERSON(S) IS/ARE NOT PRESENT AT THE TIME THE BUS ARRIVES. SIGNATURE DATE	
RELATIONSHIP TO THE CHILD:	

Cooperative Extension Service MARTIN-GATTON COLLEGE OF AGRICULTURE, FOOD AND ENVIRONMENT

Educational programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, physical or mental disability or reprisal or retalization for prior civil rights activity. Reasonable accommodation of disability may be available with prior notice. Program information may be made available in languages other than English. University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating. Lexington, KY 40506



