



Our Savior Lutheran Church Drop-off /Pick-up Authorization Form

To help ensure the safety of your child, we are asking parents and guardians to provide us with a list of individuals who are authorized to either drop-off or pick-up each child during the week of Day Camp (August 4-8, 2014). We will use this list in conjunction with Picture ID when we release each child to the adult who has come to pick them up.

Please note that we will not be releasing your child to anyone who is not on this list that you authorize for their pick-up. If you intend to make arrangements for them to go home with another child, please make sure that the appropriate adult is on the list.

Name of Camper: _____

Parent(s) Name(s): _____

Phone Number: _____

Email: _____

I authorize the following persons to drop-off or pick-up my camper during the week of Day Camp (August 4-8, 2014):

Parent/Guardian Name: _____

Parent/Guardian Signature: _____



Our Savior Lutheran Church Day Camp Registration Form

Please complete this form if you wish to register your child for our Day Camp or Jr. Day Camp to be held from **August 4-8, 2014**. Please complete one form per camper. A separate **health history form** and **drop-off/pick-up authorization form** are also required. This registration form can also be completed online at **www.oslccdaycamp.com**.

Name of Camper: _____

Registering for (please check one):

☐ Day Camp (Entering Grades 1-6)

☐ Jr. Day Camp (Ages 3, 4 & 5)

Birth Date: _____

2014-2015 Grade Level: _____

Parent(s) Name(s): _____

Address: _____

Phone Number: _____

Email: _____

Medications/Allergies: _____

Special Concerns/Requests: _____

Day Camp Costs:

Before July 1 = \$35
July 1 and after = \$45

Jr. Day Camp Costs:

Before July 1 = \$20
July 1 and after = \$30

Checks payable to: Our
Savior Lutheran Church