

Kimball Camp YMCA Off Camp Trip Release Form

During your child's week at camp they will go going on an off campus trip; therefore, we need you to sign this release form.

Statement of permission for off camp trip

By signing this release form, I hereby acknowledge that I understand that my child will be participating in an off camp trip during his or her stay at Kimball Camp. I understand that during any off camp trip, the Health Record I have completed and given to Kimball Camp will accompany this letter. In case of emergency, authorization for emergency treatment of the named participant is transferred to an adult leader or staff member participating in the trip. By signing this form, I certify that as a parent or legal guardian of the participant named below, I authorize this participant to take part in any off camp trip planned by Kimball Camp YMCA during his or her camp experience.

Name of Participant

First Name Last Name

Name of Parent or Legal Guardian

First Name Last Name

Date



Month Day Year