



Camper's last name: _____

first name: _____

Newfound Owatonna

Camper Departure Release Form 2017

This form needs to be filled out **ONLY** if the parent or legal guardian is **NOT** picking up his or her own child at the end of the session.

Parent/Guardian Name(s):

Last _____ First _____

Last _____ First _____

Name of the individual(s) responsible for checking out your child from Camp:

Last _____ First _____

Last _____ First _____

Relationship to the camper: _____

Expected date _____, 2017 of camper departure.

If this is a change from previous travel plans that were communicated to Camp, please explain:

Signature of Parent/Legal Guardian:

Signed _____ Date _____

This form requires a parent signature. To send the form to Camp:

- EMAIL a scanned copy of **signed** form to info@newfound-owatonna.com
- Or, MAIL to: **Business Office**
4 Camp Newfound Road
Harrison, ME 04040

Camp Newfound-Owatonna
4 Camp Newfound Road, Harrison, ME 04040