

Bring a Friend to Camp Day Form

PERMISSION SLIP

Date Friend is Coming to Camp _____

Camper's Name (Who is Inviting Friend) _____

Guest Child's Name _____

Address _____ Zip _____

Going into grade _____ DOB _____

I give my permission for my child to participate in all activities at Summer Friends Day Camp.

Please circle one: My child has restrictions Y N

My child has allergies Y N

If yes please explain: _____

Guest Parents Name _____

Guest Parents Cell Number (for Texting) _____

Guest Parents Signature _____

Guest Parents Email address _____