

PARENT/GUARDIAN

PARENT/GUARDIAN INFORMATION

Parent/guardian(s) listed below are authorized to pick up child, unless otherwise noted.

1. Guardian Name: _____

2. Guardian Name: _____

Relationship: _____

Relationship: _____

Mailing Address: _____

Mailing Address: _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Place of Employment: _____

Place of Employment: _____

Cell Phone: _____

Cell Phone: _____

Work Phone: _____

Work Phone: _____

E-mail Address: _____

E-mail Address: _____

PARENT CONSENT

PARENTS:

By initialing here, I give my permission for my child to Camp Rave as a Junior Counselor, and understand that there is no monetary remuneration: _____

PARENT: By initialing here, I give my permission for Camp Rave to photograph my child at Camp Rave: _____

PARENT: By initialing here, I certify that all items contained in this form are accurate _____

NOTE: Additional information will be required from parent/guardian on first day of camp, please allow yourself 5-10 minutes to fill out the required paperwork.

Parent Signature: _____ Date: _____

JUNIOR COUNSELOR

I hereby certify that I have filled out this application to the best of my knowledge and belief.

Junior Counselor Signature: _____ Date: _____