

Nazareth Science Camp--STUDENT RELEASE FORM

This form must be filled out and returned before your child starts camp.

**Student Pick-Up Authorization for _____
(Camper's Name)**

My child may be picked up from Science Camp at Nazareth College by the following individuals:

- 1) Name: _____
Relationship: _____ Phone # _____
- 2) Name: _____
Relationship: _____ Phone # _____
- 3) Name: _____
Relationship: _____ Phone # _____
- 4) Name: _____
Relationship: _____ Phone # _____

Field Trip Release

My child has permission to leave the Nazareth College for the purpose of attending field trips with the Science Camp staff. Field trips are currently being organized and I will be notified of the specific dates, times, and locations of various field trips at the beginning of each camp session.

Parent/Guardian's Signature

Date

SEND STUDENT RELEASE FORM TO:

Nazareth Science Camp
Nazareth College
4245 East Avenue
Rochester, NY 14618
Email: scicamp@naz.edu