



A Science Activity Center on Leeds Ponds Preserve
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PICK UP FORM MUST BE COMPLETED BY PARENT/GUARDIAN

PLEASE PRINT CLEARLY – MUST BE SUBMITTED WITH SUMMER CAMP REGISTRATION FORM

STUDENT'S NAME: _____ PARENT/GUARDIAN'S NAME: _____

TELEPHONE #: _____ WORK #: _____ CELL #: _____

If someone other than those designated below is asked to pick up my child, I will give them a note signed by me.
If someone asks to pick up my child who is not designated below and does not have a note,
I understand that I will be called to verify. This will necessitate a delay in the pickup procedure.

The following people are authorized to pick up my child at the end of the day: (THIS MUST INCLUDE SPOUSES)

1) NAME: _____ RELATIONSHIP: _____ TELEPHONE #: _____

2) NAME: _____ RELATIONSHIP: _____ TELEPHONE #: _____

3) NAME: _____ RELATIONSHIP: _____ TELEPHONE #: _____

4) NAME: _____ RELATIONSHIP: _____ TELEPHONE #: _____

5) NAME: _____ RELATIONSHIP: _____ TELEPHONE #: _____

PARENT/GUARDIAN – PRINT

PARENT/GUARDIAN'S SIGNATURE

DATE

**NOTE: CAMPER'S WILL STAY WITH THE STAFF UNTIL AN AUTHORIZED PERSON PICKS UP THE CHILD.
ALL AUTHORIZED PERSONS MUST PARK THE CAR IN THE LOWER PARKING LOT AND WALK TO THE PICK UP AREA.**

CHARGE ACCOUNT INFORMATION

AMOUNT ENCLOSED: \$ _____

RESTRICTIONS: _____

FOOD RESTRICTIONS: _____

FOOD ITEMS AVAILABLE: SNAPPLE, WATER, CHIPS, PRETZELS, GRANOLA BARS, FRUIT ROLL-UPS, ETC.