

CAMP H.E.R.E. PERMISSION SLIP

STAMFORD CENTRAL SCHOOL

PERMISSION SLIP FOR ACTIVITIES OUTSIDE OF INDIAN TRAIL PARK

My child has permission to attend/participate in hikes and field trips, out of Indian Trail Park, as part of the Camp H.E.R.E. program. This would include walking to Stamford Central School, with supervision, for learning activities.

CHILD'S FULL NAME _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____

CAMP H.E.R.E. RELEASE TIME PERMISSION FORM

My child, _____, has permission to stay at the park/pool or walk home by them self at the conclusion of the camp day. Child's grade _____

Parent Signature _____ Date _____

****OR****

My child, _____, will be picked up daily by a parent/guardian at the conclusion of the camp day. He/She may also be picked up by only those people that I have listed below. Child's grade _____

Name of those who may pick up the above listed child from camp:

1. _____ Relationship _____ Phone # _____

2. _____ Relationship _____ Phone # _____

3. _____ Relationship _____ Phone # _____

*****THE ABOVE PERMISSION SLIP MUST BE RETURNED WITH REGISTRATION FORM.*****



Youth size: \$7 each

Adult size: \$9 each

CAMP H.E.R.E. T-SHIRT ORDER FORM

RETURN NO LATER THAN JUNE 8th!!!!!!

CHILD'S NAME _____ GRADE _____

<u>QUANTITY</u>	<u>SIZE</u>	<u>QUANTITY</u>	<u>SIZE</u>
_____	YOUTH SMALL	_____	ADULT SMALL
_____	YOUTH MEDIUM	_____	ADULT MEDIUM
_____	YOUTH LARGE	_____	ADULT LARGE
_____	YOUTH X-LARGE	_____	ADULT X-LARGE

TOTAL NUMBER OF SHIRTS ORDERED _____ TOTAL AMOUNT ENCLOSED _____

MAKE CHECKS PAYABLE TO STAMFORD CENTRAL SCHOOL