Session _____
Unit _____
Office use only

Girl Scouts- North Carolina Coastal Pines

CAMPER RELEASE/PARENT AUTHORIZATION
Camp Hardee
Session Dates: _____

Camper's Name: _____

Please list those adults authorized to pick up your daughter during or after camp. **Don't forget to include yourself.**

1. _____ (____)_____ _____
Name Phone number Relationship to camper

2. _____ (____)_____ _____
Name Phone number Relationship to camper

3. _____ (____)_____ _____
Name Phone number Relationship to camper

4. _____ (____)_____ _____
Name Phone number Relationship to camper

To provide a safe and enjoyable camp experience for your camper, are there any custody situations we should be aware of?

_____

_____

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