

Bring this form with you on the first day of day camp (one per camper)

Counselor Name

Camper's Name _____ Session(s) # _____

Photo Identification is required for pick-up from Day Camp

- Please choose one:**
- Bus to/from NE Alameda Elementary School
 - Bus to/from Gresham United Methodist Church
 - Bus to/from North Clackamas Aquatic Center
 - Drop-off/Pick-up at Camp (Drop-off 8:30 am, pick-up 5:00 pm)

The following people are allowed to pick-up my child from YMCA Camp Collins Day Camp. Please include the names of parents/guardians.

Your Name _____ Relationship _____

Phone Number _____ Cell/Pager/Other _____

Name _____ Relationship _____

Phone Number _____ Cell/Pager/Other _____

Name _____ Relationship _____

Phone Number _____ Cell/Pager/Other _____

Name _____ Relationship _____

Phone Number _____ Cell/Pager/Other _____

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_____ Camper's Name

Counselor Name

Camp Store Accounting Card

Deposit Amount \$ _____

Date	Amount Spent	Balance	Date	Amount Spent	Balance
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

We encourage you to leave any remaining balance at the end of the session and donate it to the summer camp scholarship fund. Thanks!