

SonShine Day Camp

Sign-Out Consent Form

I/We, the legal guardian(s) of _____ hereby consent to have my/our child signed-out only by the following names I have written on this form.

If for any reason I/we are unable to pick-up my/our child I/we understand that if the following persons do not show proper photo identification, they will be unable to take my/our child home and one of us will have to be called to make proper arrangements.

If at any time I/we no longer trust any of the following persons to pick up my/our child, I/we will instruct SonShine PreSchool to take their name(s) off the list. I/We will not hold SonShine PreSchool or any of their staff responsible if anything should happen involving my/our child and the persons on this list once my/our child is signed out by them.

The following are authorized to pick up my/our child with photo identification:

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Name: _____ Relation: _____ Phone #: _____

Legal Guardian Signature

Legal Guardian 2 Signature

Date

Date