

# CONCERNS OF POLICE SURVIVORS, INC.

## KIDS CAMP

SALVATION ARMY WONDERLAND CAMP & CONFERENCE CENTER

SALVATION ARMY WONDERLAND CAMP, WI

### CONSENT TO CHAPERONE

(PRINT NAMES OF CHILD CAMPERS IN YOUR FAMILY ATTENDING)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned does hereby authorize the below-named individual to act as a temporary guardian of my child(ren) at C.O.P.S. Kids Camp. As a temporary guardian, the individual listed below is authorized to talk with my child(ren)'s counselor and mentor regarding any issues they may have while at camp, either emotional or behavioral. I give this individual permission to make any decisions concerning the medical treatment\* for my child(ren) while at camp and will provide the individual with proper medical/insurance cards needed for my child(ren). It is understood that the individual listed below will also be responsible for making sure my child(ren) adhere to the C.O.P.S. Standard Operating Procedures for the Hands-On Programs and will make sure they are aware of the procedures put in place. I further understand that authority will terminate once the child(ren) are returned to their parent (myself). By his/her signature hereon, the person I have authorized to act as a temporary guardian for the purpose of C.O.P.S. Kids Camp has signed his/her signature hereon accepting the responsibility as well as the terms and conditions contained herein.

**Temporary Guardian for my Child(ren) while at camp:** \_\_\_\_\_

**Relationship to Child(ren):** \_\_\_\_\_

NOTE: The signatures of all of the parties should have a witness.

\_\_\_\_\_  
**Printed Name of Parent**

\_\_\_\_\_  
**Signature of Parent**

Dated this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
**Witness**  
**to Parent Signature**

WITNESSED this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_

**I have read the above and forgoing and agree to act as a temporary guardian of the child(ren) noted above.**

\_\_\_\_\_  
**Printed Name of Temporary Guardian**

\_\_\_\_\_  
**Signature of Temporary Guardian**

Dated this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
**Witness to Temporary Guardian Signature**

WITNESSED this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

**\*NOTE: It is suggested that the temporary guardian have a notarized document from the parent stating that the temporary guardian can seek emergency medical treatment for the child(ren). Some states require a notarized document for a guardian to make medical decisions.**