



Authorized Pickup List
Bound Brook Recreation Summer Camp



I _____, parent/guardian of _____,
permit the following individuals to pick up _____ for the duration of the _____ summer
camp season.

Please include at least one parent or guardian's contact information below.

Name	Relationship to Child	Phone Number	Email Address

Reminders:

- **Individuals on this list will be required to show proof of ID when picking up your camper.** Please ensure they bring their government ID to each pickup.
- Individuals on this list must follow the same pickup/drop-off policy as the primary care giver (sign in/out each day).
- Individuals not on this list will NOT be allowed to pick up your camper, unless prior authorization has been given by the parent/guardian to the Camp Director and Assistant Director (one day authorization forms are available).

Parent/Guardian Signature: _____ Date: _____