

Philipstown Recreation Department

**CAMP DAY TRIP PARENT/GUARDIAN PERMISSION FORM**

**June-August 2018**

*(Day Camp 1st Grade - Teen Travel Only)*

Date \_\_\_\_\_

Camper Name \_\_\_\_\_

Grade \_\_\_\_\_

I, \_\_\_\_\_, give my child, \_\_\_\_\_, permission to participate in ALL day trips in which he/she is eligible and registered for with the Philipstown Recreation Department; including swimming at the Highlands Country Club.

Trips are outlined in the camp brochure. Any change to the camp calendar will be issued in writing to all registered participants.

My child's attendance at camp on trip days constitutes with permission that they attend.

Parent/Guardian Signature \_\_\_\_\_

**REGISTRATION FOR ALL SUMMER CAMPS OPENS MARCH 12th FOR RESIDENTS  
AND MARCH 19th FOR NON-RESIDENTS**