



Five Rivers Council Summer Camp
SCOUT EARLY RELEASE FORM

This form is used in the event a Scout will need to leave camp, for any reason, prior to the scheduled end of his session.

The below named Scout is authorized to depart camp earlier than scheduled by his Pack or Troop. Additionally, the below named individual is the person authorized to pick up my Scout.

Date and Time of Release: _____

Name of Scout: _____

Mailing Address: _____

City/State/Zip: _____

Home Telephone No: _____ **Troop:** _____ **Council:** _____

Authorized Release to - Individuals Name: _____

Mailing Address: _____

City/State/Zip: _____

Home Telephone No: _____ **Work Telephone No:** _____

Parent's (Or Legal Guardian's) Printed Name: _____

Parent's (Or Legal Guardian's) Signature: _____

Parent's (Or Legal Guardian's) Work or Cell Phone: _____

Comments: _____

***** **On Site Verification** *****

Before leaving Camp, Scouts must check-out with their unit leader and the camp office.

Signature of Unit Leader _____ **Date** _____

Unit# _____

Signature of Camp Director _____ **Date** _____

(Keep original for use at time of release. Give authorized individual a photocopy if requested.)