



Day Camp - Pick up

Please PRINT CLEARLY and return this form with your camper's health form and final payment before or at registration. Please, only one camper per form. Our policy is that any one of these individuals will be required to present a valid ID when picking up your child.

The following people have permission to pick up _____
Name of camper (please print)

from (please circle one): Boerne His Hill

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

First Name	Last Name	Telephone Numbers	Drivers License Number
------------	-----------	-------------------	------------------------

Please note: For safety reasons, your child will not be permitted to be picked up by any individual whose name does not appear on this list. **Please have proper identification with you**

P. O. Box 9, Comfort, Texas 78013 • (830) 995-3388 • Fax: (830) 995-2050

camp@hishill.org • www.hishill.org