

General Manager: Michael Vaughan

Mass Premier Volleyball Camp Dismissal Form

Check the box below to indicate your desired pick-up procedure for the duration of our Summer Volleyball Camp Programs at Mass Premier Courts.

L give my athlete <u>permission to walk to the car/home</u> without an ID Authorized Pick Up from the Volleyball Summer Camp Program at Mass Premier. My athlete will be considered a "Walker" and will walk out of the facility without staff supervision.

Athlete Name:	
_	

Parent Guardian Name: \_\_\_\_\_

Parent Guardian Signature:

L DO NOT give my athlete permission to walk to the car without an ID Authorized Pick Up from the Volleyball Summer Camp Program at Mass Premier. My athlete will <u>remain with staff until an authorized pick up presents staff with an ID</u>. IDs must be presented daily.

Athlete Name:

Parent Guardian Name: \_\_\_\_\_

Parent Guardian Signature:

I give my athlete permission to leave the facility grounds with the following authorized people.

Authorized Person	Phone Number	Relation