



Spring Retreat Permission Slip

I give my permission for _____

to stay at Camp ECCO for the weekend of April 20, 2018 - April 22, 2018.

Emergency Contact Information:

Camper's Name _____

Contact's Name _____

Relationship _____

Home phone _____

Mobile _____

In case you cannot be reached please provide a secondary contact:

Contact's Name _____

Relationship _____

Home phone _____

Mobile _____

Please list any allergies the camper has:

Signature of Parent or Guardian:

_____ Date: _____