

2026 Camp Dismissal Form

(valid from 6/01/2026 to 12/31/2026)

Camper's Name: _____

The following people have written permission to pick up my child at dismissal:

Parents/Guardians: _____

Approved Carpools/Others:

1. _____

2. _____



Emergency Contacts:

If we cannot reach you by phone, **please list a trusted emergency contact or two that may act on your behalf and provide transportation if necessary.**

Possible Emergencies:

- Illness, behavioral issues, or a new injury at camp
- If a child is not picked up within 10 minutes after dismissal

Name: _____ Phone: _____

Relationship to child: _____

Name: _____ Phone: _____

Relationship to child: _____

Allergies:

Please list any food or allergies.

Allergy:

Allergic Reaction: _____

Parent/Legal Guardian Signature: _____

Date: _____

Photo Release

I hereby grant The Cultural Arts Center at Glen Allen permission to use my child's likeness in a photograph in its publications, website, without any other consideration.

I understand and agree that these materials will become the property of The Cultural Arts Center at Glen Allen and will not be returned.

I authorize The Cultural Arts Center at Glen Allen to edit, alter, distribute, copy, or publish this photo for purposes of publicizing The Center's programs. In addition, I waive the right to approve the finished product wherein a likeness appears and waive the right to further compensation.

I hereby hold harmless and forever discharge The Cultural Arts Center at Glen Allen from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or others acting on my estate's behalf by reason of this authorization.

I hereby certify that I am the parent or guardian of

(child named above) and do hereby give my consent on their behalf.

(Parent/Guardian's Signature) _____

(Parent/Guardian's Printed Name) _____