



Camp Address: 147-37 70th Road Flushing N.Y.11367 Summer Phone Number: 516-680-8798

Parent Authorization Form

During the course of the summer, we will be going on various trips (by bus or walking) and partake in special activities. Your child will not be permitted to go on these trips or participate in these special activities without a permission slip.

Please Detach & Return

Child's Name(s) _____

Address _____

Emergency Phone # _____

I give permission for my child to accompany Chazak Day Camp on all its trips (using any mode of transportation) and all special activities.

Parent's Signature _____ Date _____