

**The University of Texas at Austin  
Youth Protection Program  
Permission to Leave Campus**

Camper's Name: \_\_\_\_\_

Program Name/Session: \_\_\_\_\_

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*This form must be completed and returned to the camp director prior to the program start date.*

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For the safety of your child and for liability reasons, we will not allow campers to leave campus without your prior permission from a parent or legal guardian, other than for emergency or pre-approved doctor visits. Due to the size of the camps, we are unable to accept leave requests submitted after the program start date. Please list any adults (eighteen years or older) below, including the parent/legal guardian, to whom you grant permission to take your child off campus. All those listed will be required to show identification when picking up your child. Please note that submission of Permission to Leave Campus form does not guarantee that the request will be approved.

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I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_ give permission to the persons listed below to take my child off campus during times that will not conflict with any scheduled activities within the \_\_\_\_\_ (camp/program name).

Name	Relationship	Phone Number
1.		
2.		
3.		
4.		
5.		

\_\_\_\_\_  
SIGNATURE OF PARENT/LEGAL GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME

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**PLEASE RETURN TO CAMP DIRECTOR:**

Name of Program: \_\_\_\_\_

Camp Director: \_\_\_\_\_

Camp Director Phone: \_\_\_\_\_

Camp Director Fax: \_\_\_\_\_

Camp Director Mailing Address: \_\_\_\_\_