| Name | | | | |
|---|------------------------|-----------------------|----------------|------------------------------|
| County | | | | |
| | | | | |
| F60 | 00R: Tennessee 4-H | l Member Re | elease Forr | n |
| | | | | |
| (Parent or guardian) | give permission for | my child | (Nam | e of camper) |
| to be released from | | at | on | |
| to be released from(Name of | of event) | (Time) | 011 | (Date) |
| to | | | | |
| | | | | |
| My child will be picked up by | * | ode a collida a silal | | (Discounting of contracting) |
| | | | | |
| and (will / will not) be returnin Choose One | ng to the 4-H activity | at Time a | and Date of Re | eturn, if applicable |
| | | | | 7 |
| | | | | |
| | | | | |
| | ıll responsibility for | my child ar | nd his/her b | pelongings once they leave 4 |
| supervisory control. | | | | |
| Signature(Parent or guarantee | ardian) | _ | | |
| | | | | |
| Date | | | | |
| | | | | |
| Emergency Phone Number(s | s): Home (|) | | |
| 5 , | , | | | |

Mobile (_____)

*This form is available online





^{*} The person(s) picking up the child will be asked to verify their identity to their county 4-H Agent. Under no circumstances will campers be allowed to leave the 4-H event without a written consent and verification of the person(s) picking them up.