



# Christian Youth Theater Wichita

## CYT Wichita CARPOOL FORM

Child's name: (under 18 years old) \_\_\_\_\_

My child has permission to leave the CYT camp with the following adults other than a parent:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

I understand that my child will not be released to anyone other than the adults listed above without my authorization.

Parent's name: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Other phone: \_\_\_\_\_

Parent signature: \_\_\_\_\_ date: \_\_\_\_\_