

Emergency Contact Information

Emergency Contact: _____ Relation: _____
Name & Phone Number

Emergency Contact: _____ Relation: _____
Name & Phone Number

I hereby authorize that the Humane Society of Northeast Georgia can release my child/children to the following person(s). Driver's License Number and Phone Number is Required.

Name: _____ D.L. Number: _____ Phone Number: _____

Name: _____ D.L. Number: _____ Phone Number: _____

If anyone other than those listed above is to pick up my child, please notify the Humane Society of Northeast Georgia, and supply the staff with the Name and Drivers License Number of the authorized adult.

Summer Camp Fees: \$150 per Camper (Includes T-Shirt, leash, clicker, and crafts)

Please Return Form with Payment to:

Pet P.A.L.S. Summer Camp/ Humane Society of Northeast Georgia
845 West Ridge Road, Gainesville, GA 30501
(770) 538-0029 FAX or KelleyUber@humanesocietyhallcounty.com

_____ Check Enclosed *Please Charge My* _____ MasterCard _____ Visa

Card #: _____ Exp Date: _____

Name on Card: _____ CVV# (On Back): _____

Please Make Checks Payable to: The Humane Society of Northeast Georgia

After completing your registration and submitting payment, you will receive a confirmation letter, additional Pet P.A.L.S. Camp details, and a health/waiver form to sign and return.

Please call our Humane Education Department at 770.532.6617 ext. 243 with further questions.

FOR OFFICE USE ONLY

Receipt # _____

Date Confirmation Letter/Waiver Mailed: _____