



Deerkill Transportation Form & Policy for Return of Campers After Camp

We want to guarantee that all campers are returned home as safely and as quickly as possible. You can be of great assistance to us. You should be waiting outside your home or at the central bus stop for your children when the bus returns. Unless we have written authorization below, our bus counselor must see you before releasing your child. **Please sign and return this form to us by June 1st.**

Manhattan, Rockland, Orange and Bergen Campers

If you child has your permission to return to an empty home, please let us know this important fact below. Otherwise, if we are not sure you are home, the bus driver will beep, or the bus counselor will ring your bell. We will then wait for one minute before continuing. A 2nd attempt will be made to return your children home later in the route. If that fails your child will go home with our bus counselor to wait for you to pick them up.

If you live in an apartment building with a doorman we will only leave your children in his/her care if you give us written permission to do so below. If you have not given us permission to leave your child at an empty home, or with a doorman, and **if you are going to be delayed please call us as soon as possible**. Our buses have commercial radio systems. Open communications will greatly reduce everyone’s anxiety and frustration.

If we are not home you have permission to leave _____, my child(ren), with:

- Our doorman**
- Our empty home**

Hoboken and Montclair Area Campers

Many of you have indicated that you would be carpooling to the pick-up or drop-off locations with other Deerkill families. **Please indicate below who is authorized to pick up your children in the afternoon**. Note that we will not drop off your children with another parent or caregiver unless we receive this written authorization in advance.

I authorize the following people to pick up _____, my child(ren), in the afternoon at the central bus stop (please limit to 3):

1. _____
2. _____
3. _____

If the above policies do not meet your needs please contact us so that we can arrange an appropriate alternative.

Date: _____

Signature: _____

Name: _____

Street Address: _____

City, State, Zip: _____