



## Top of the South Eastercamp 2021

### Leave Pass form

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

Youth Group: \_\_\_\_\_

Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Date to leave camp: \_\_\_\_\_

Time to leave camp (approx.): \_\_\_\_\_

Date to return to camp: \_\_\_\_\_

Time to return to camp (approx.): \_\_\_\_\_

Reason for leaving camp:

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**This form must be signed by your parent / caregiver;**

I confirm that the details entered above are true and correct. I also confirm that I give permission for my son/daughter to leave camp during the approved period.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Requests must be received by Top of the South Easter Camp by 28<sup>th</sup> March 2021.**

Please scan this form and email to [info@eastercamptops.nz](mailto:info@eastercamptops.nz). Upon receipt and confirmation of your leave pass, a member of our staff will contact you to confirm. Please be patient with us as this can take a couple of days.