

BLUESTONE CAMP AND RETREAT
PERMISSION SLIP
FOR VENTURE 2 CAMPERS (9th – 10th grades)

As a part of the Hogan Venture Camp experience, campers will have an opportunity to participate in a canoe trip activity that requires transportation off site.

Camper's Name: _____ Camp Date: _____

I give my permission for my child to leave the premises of Bluestone Camp and Retreat for the canoe trip. I understand that no camper leaves without full authorization of the camp director and under the supervision of resident counselors.

Parent/Guardian Signature: _____ Date: _____